

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 10, 2024
Secretary of State
0193220686CC

Entity Name: ODYSSEY AT OLYMPIA POINTE ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907 US

FEI Number: 20-4417763

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROHM, JOHN
C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN STROHM

04/10/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	COLLINS, CORRY	Name	BOZIN, ROBERT
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907
Title	TREASURER	Title	SECRETARY
Name	TRAYER, JEFF	Name	DOUGHERTY, CHERYL
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907
Title	DIRECTOR	Title	DIRECTOR
Name	WOOLEY, MARCIE	Name	LABRECHE, LUC
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907
Title	DIRECTOR		
Name	KAHIGIAN, ELAINE		
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE		
City-State-Zip:	FORT MYERS FL 33907		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CORRY COLLINS

PRESIDENT

04/10/2024

