

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004142

Entity Name: MONTEREY AT LAKE SEMINOLE ASSOCIATION, INC.

Current Principal Place of Business:

FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100
SAINT PETERSBURG, FL 33716

Current Mailing Address:

FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100
SAINT PETERSBURG, FL 33716 US

FEI Number: 20-4831578

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZACUR, RICHARD A ESQ.
5200 CENTRAL AVE
ST PETERSBURG, FL 33707 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: RICHARD ZACUR

01/24/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ANGELUS, DEBORAH
Address FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

Title PRESIDENT
Name DRISCOLL, DAVID
Address FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

Title SECRETARY
Name MCCARTHY, BARBARA
Address FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

Title VP
Name FRANKLIN, JUDY
Address FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

Title TREASURER
Name VISCOUNT, GREGORY
Address FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NO, SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

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: DAVID DRISCOLL

PRESIDENT

01/24/2019

Electronic Signature of Signing Officer/Director Detail

Date