I hereby certify that the information indicated on this report or supplemental report is true and a oath; that I am an officer or director of the corporation or the receiver or trustee empowered to above, or on an attachment with all other like empowered.		
SIGNATURE: LAURA LANDSBERGER	OTHER	04/11/2017

## SIGNATURE: LAURA LANDSBERGER

Electronic Signature of Signing Officer/Director Detail

its this statement for the purpose of changing its registered office or registered agent,
ALANDSBERGER

The above named entity submi or both, in the State of Florida. SIGNATURE: LAURA LANDSBERGER 04/11/2017

	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	P	Title	VP	
Name	BAREFIELD, BRAD	Name	PATTERSON, KENNETH	
Address	1328 PARK TRACE SE	Address	1421 MT VERNON RD	
City-State-Zip:	ATLANTA GA 30315	City-State-Zip:	LITHIA SPRINGS GA 30122	
Title	DIRECTOR	Title	D	
Name	SHELTON, JUSTIN	Name	WALKER, DAVID	
Address	12273 EMERALD COAST PARKWAY	Address	4014 KILMARTIN DR	
City-State-Zip:	110 MIRAMAR BEACH FL 32550	City-State-Zip:	TALLAHASSEE FL 32309	
Title	DIRECTOR	Title Name	DIRECTOR BALDONE, DAMON	
Name	BEARDEN, ROBERT	Address	162 NEW ORLEANS BLVD	
Address	P.O. BOX 1344	City-State-Zip:		
City-State-Zip:	CARIO GA 39828	Ony Otato Zip.		
Title	OTHER	Title	TREASURER, SECRETARY	
		Name	MORAN, TIM	
Name Address	LANDSBERGER, LAURA P.O. BOX 5263	Address	4400 E HIGHWAY 20 311	
City-State-Zip:	NICEVILLE FL 32578	City-State-Zip:	NICEVILLE FL 32578	

# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N0500007586

Entity Name: SAINT TROPEZ HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

4400 HWY 20 EAST SUITE 311 NICEVILLE, FL 32578

## **Current Mailing Address:**

PO BOX 5263 NICEVILLE, FL 32578 US

## FEI Number: 20-3219121

## Name and Address of Current Registered Agent:

LANDSBERGER, LAURA 4400 HIGHWAY 20 E SUITE 311 NICEVILLE, FL 32578 US

FILED Apr 11, 2017 Secretary of State CC2843752277

Certificate of Status Desired: No

Date