## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011146

Entity Name: CENTRE PARK COMMERCE CENTRE CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

1877 NORTHGATE BLVD STE #4 SARASOTA, FL 34234

**Current Mailing Address:** 

1877 NORTHGATE BLVD.

STE. #4

SARASOTA, FL 34234 US

FEI Number: 20-4165915 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE LAW OFFICES OF KEVIN T. WELLS, P.A. 1800 SECOND ST STE 808 SARASOTA, FL 34236 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 02, 2017

**Secretary of State** 

CC5555819546

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

CARE, DARRIN D ESTES, JAMES Name Name

1877 NORTHGATE BLVD #4 Address Address 1877 NORTHGATE BLVD #4

City-State-Zip: SARASOTA FL 34234 City-State-Zip: SARASOTA FL 34234

Title TREASURER, SECRETARY Title AS

Name POHLMAN, JOHN MANNING, MICHAEL AS Name

Address 1877 NORTHGATE BLVD #4 1877 NORTHGATE BLVD SUITE 4 Address City-State-Zip: SARASOTA FL 34234 City-State-Zip: SARASOTA FL 34234

Title **DIRECTOR** 

Name TZANNETAKIS, JOHN Address 1877 NORTHGATE BLVD

STE #4

City-State-Zip: SARASOTA FL 34234

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: MICHAEL MANNING

Electronic Signature of Signing Officer/Director Detail

ASSISTANT SECRETARY

04/02/2017