

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002640

**Entity Name:** CABANA CLUB AT PARADISE LAKES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 23, 2019**  
**Secretary of State**  
**6552335594CC**

**Current Principal Place of Business:**

2001 PARADISE LAKES BLVD.  
LUTZ, FL 33558

**Current Mailing Address:**

14499 N. DALE MABRY  
SUITE 185  
TAMPA, FL 33618 US

**FEI Number: 20-4457665**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

APEX FINANCIAL SOLUTIONS, LLC  
14499 N. DALE MABRY  
SUITE 185  
TAMPA, FL 33618 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: RUCHI ATTAL**

**04/23/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           BUCHANAN, JERRY  
Address        2001 PARADISE LAKES BLVD.  
City-State-Zip: LUTZ FL 33558

Title           DIRECTOR  
Name           TEBOR, MICHAEL  
Address        431 SE 6TH AVE  
City-State-Zip: POMPANO BEACH FL 33060

Title           VP  
Name           BUCHANAN, PATRICIA  
Address        21068 LITTLE MAGENS LOOP  
City-State-Zip: LUTZ FL 33558

Title           DIRECTOR  
Name           DION, GARY  
Address        10225 GULF BLVD.  
City-State-Zip: TREASURE ISLAND FL 33706

Title           SECRETARY  
Name           BONHAM, DEBRA S.  
Address        2733 BIRDLAND COURT  
City-State-Zip: LAND O LAKES FL 34639

*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: JERRY BUCHANAN**

**PRESIDENT**

**04/23/2019**

Electronic Signature of Signing Officer/Director Detail

Date