## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003351

Entity Name: PARK SQUARE CITYHOMES ASSOCIATION, INC.

FILED
Jan 22, 2018
Secretary of State
CC3992495524

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

652 E. BLOOMINGDALE AVE BRANDON. FL 33511

## **Current Mailing Address:**

C/O MERIT MANAGEMENT 3433 LITHIA PINECREST ROAD STE 301 VALRICO, FL 33596 US

FEI Number: 06-1782500 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

PITROWSKI, RICHARD S MANAGER 652 E. BLOOMINGDALE AVE BRANDON, FL 33511 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 S. PITROWSKI 01/22/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title D

Name STANDRIDGE, MICHAEL Name STANDRIDGE, KATHLEEN

Address C/O MERIT MANAGEMENT Address C/O MERIT MANAGEMENT 3433 LITHIA PINECREST ROAD STE 3433 LITHIA PINECREST ROAD STE

301

City-State-Zip: VALRICO FL 33596 City-State-Zip: VALRICO FL 33596

Title T Title S

Name OZKILKIS, DONN Name PING, ZEBULON

Address C/O MERIT MANAGEMENT Address C/O MERIT MANAGEMENT

3433 LITHIA PINECREST ROAD STE 3433 LITHIA PINECREST ROAD STE

City-State-Zip: VALRICO FL 33596 City-State-Zip: VALRICO FL 33596

Title PRESIDENT

Name DEFONZO, PETER

Address C/O MERIT MANAGEMENT

3433 LITHIA PINECREST ROAD STE

301

City-State-Zip: VALRICO FL 33596

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: PETER DEFONZO PRESIDENT

Electronic Signature of Signing Officer/Director Detail

01/22/2018 Date