

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009350

Entity Name: NEW HOMETOWN AT WINTHROP HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 20, 2018
Secretary of State
CC1726469515**Current Principal Place of Business:**3922 COCONUT PALM DRIVE
SUITE 108
TAMPA, FL 33619**Current Mailing Address:**3922 COCONUT PALM DRIVE
SUITE 108
TAMPA, FL 33619 US**FEI Number: 20-5469160****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	VP
Name	FONTANA, JOSEPH ("JOE")
Address	3922 COCONUT PALM DRIVE SUITE 108
City-State-Zip:	TAMPA FL 33619

Title	VP, SECRETARY, DIRECTOR
Name	DEASON, JEFF
Address	3922 COCONUT PALM DRIVE SUITE 108
City-State-Zip:	TAMPA FL 33619

Title	PRESIDENT
Name	BURDETT, ANTHONY J.
Address	551 NORTH CATTLEMEN RD., SUITE 200
City-State-Zip:	SARASOTA FL 34232

Title	VP, TREASURER, DIRECTOR
Name	THORNE, BOB
Address	3922 COCONUT PALM DRIVE SUITE 108
City-State-Zip:	TAMPA FL 33619

Title	EXTERNAL DIRECTOR
Name	WOOLDRIDGE, GARY
Address	11113 GRAND PARK AVE
City-State-Zip:	RIVERVIEW FL 33578

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: ANTHONY J. BURDETT**PRESIDENT****03/20/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date