

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009713

**FILED**  
**Mar 14, 2016**  
**Secretary of State**  
**CC5339391863**

**Entity Name:** COBBLESTONE LANDING TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

449 CENTRAL AVENUE  
SUITE 105  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

449 CENTRAL AVENUE  
SUITE 105  
ST. PETERSBURG, FL 33701 US

**FEI Number: 13-4344074**

**Certificate of Status Desired: No**

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

VESTA PROPERTY SERVICES  
449 CENTRAL AVENUE  
SUITE 105  
ST. PETERSBURG, FL 33701 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: SHERILYN CRAIG**

**03/14/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, TREASURER  
Name FREDRICKSON, COREY  
Address 449 CENTRAL AVENUE  
SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33701

Title SECRETARY  
Name ROGERS, CATHY  
Address 449 CENTRAL AVENUE  
SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name WASIK, THOMAS  
Address 449 CENTRAL AVENUE  
SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name CONNORS, CHARLOTTE  
Address 449 CENTRAL AVENUE  
SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name MOORE, CLIFTON  
Address 449 CENTRAL AVENUE  
SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33701

*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: COREY FREDRICKSON**

**PRESIDENT**

**03/14/2016**

Electronic Signature of Signing Officer/Director Detail

Date