

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

DOCUMENT# N06000010868

**Entity Name:** MIDTOWNE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**6620 SOUTHPOINT DR S  
SUITE 610  
JACKSONVILLE, FL 32216**Current Mailing Address:**6620 SOUTHPOINT DR S  
SUITE 610  
JACKSONVILLE, FL 32216 US**FEI Number:** 20-5745337**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCABE, MICHAEL J  
1400 PRUDENTIAL DRIVE  
SUITE 5  
JACKSONVILLE, FL 32207 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:** MICHAEL MCCABE

02/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name RAMIDI, SHARATHANTH  
Address 6620 SOUTHPOINT DR S  
SUITE 610  
City-State-Zip: JACKSONVILLE FL 32216

Title VP  
Name JESSE, SCOTT III  
Address 6620 SOUTHPOINT DR S  
SUITE 610  
City-State-Zip: JACKSONVILLE FL 32216

Title PRESIDENT  
Name SRINIVASAN, SUJATHA  
Address 6620 SOUTHPOINT DR S  
SUITE 610  
City-State-Zip: JACKSONVILLE FL 32216

Title TREASURER  
Name YANABATHINA, KISHORE  
Address 6620 SOUTHPOINT DRIVE SOUTH  
610  
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR  
Name KSHIRSAGAR, ABHIJIT  
Address 6620 SOUTHPOINT DRIVE SOUTH  
City-State-Zip: JACKSONVILLE FL 32216

*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:** SUJATHA SRINIVASAN

PRESIDENT

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date