

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002955

**FILED**  
**May 19, 2020**  
**Secretary of State**  
**0238767338CC**

**Entity Name:** OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION  
1400 LAKE TARPON AVE  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION  
P.O. BOX 1294  
TARPON SPRINGS, FL 34688 US

**FEI Number: 24-1432736**

**Certificate of Status Desired: No**

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

FRANKLY COASTAL PROPERTY MGMT, LLC DBA ASSOCIATION DATA MANAGEMENT  
1400 LAKE TARPON AVE  
TARPON SPRINGS, FL 34689 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:** LYNN M. PARRISH

05/19/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHELHAMER, DIANNE  
Address        OPAL PLACE TOWNHOMES  
                 HOMEOWNERS ASSOCIATION  
                 P.O. BOX 1294  
City-State-Zip: TARPON SPRINGS FL 34688

Title            VP, TREASURER  
Name            JOHNSON, HILARY  
Address        OPAL PLACE TOWNHOMES  
                 HOMEOWNERS ASSOCIATION  
                 P.O. BOX 1294  
City-State-Zip: TARPON SPRINGS FL 34688

Title            SECRETARY  
Name            STOYANOVA, SVELTA  
Address        OPAL PLACE TOWNHOMES  
                 HOMEOWNERS ASSOCIATION  
                 P.O. BOX 1294  
City-State-Zip: TARPON SPRINGS FL 34688

*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:** DIANNE SHELHAMER

**PRESIDENT**

05/19/2020

Electronic Signature of Signing Officer/Director Detail

Date