above, or on an attachment with all other like empowered.

SIGNATURE: DIANNE SHELHAMER

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0700002955

Entity Name: OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION 36434 US HWY 19 N PALM HARBOR, FL 34684

Current Mailing Address:

OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION 36434 US HWY 19 N PALM HARBOR, FL 34684 US

FEI Number: 24-1432736

City-State-Zip: LARGO FL 33773

Name and Address of Current Registered Agent:

FRANKLY COASTAL PROPERTY MGMT, LLC DBA ASSOCIATION DATA MANAGEMENT OPAL PLACE TOWNHOMES HOMEOWNERS ASSOCIATION 36434 US HWY 19 N PALM HARBOR, FL 34684 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		1	0/23/2018
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	PRESIDENT	Title	VICE PRESIDENT - TREASURER	
Name	SHELHAMER, DIANNE	Name	TRENTMANN, CRYSTAL	
Address	13251 OPAL CT	Address	7040 OPAL DR	
City-State-Zip:	LARGO FL 33773	City-State-Zip:	LARGO FL 33773	
Title	SECRETARY			
THE	OLONE TANT			
Name	HOURIGAN, MAUREEN			
Address	13231 OPAL CT			

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

PRESIDENT	10/23/2018

FILED Oct 23, 2018 Secretary of State CC0339112822

Certificate of Status Desired: No

Date