

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007153

Entity Name: CARILLON BEACH INN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**114 CARILLON MARKET ST
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**156 NORTH COUNTY HIGHWAY 393
#7
SANTA ROSA BEACH, FL 32459 US**FEI Number:** 20-8990519**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOCAL ASSOCIATION MANAGEMENT LLC
156 NORTH COUNTY HIGHWAY 393
#7
SANTA ROSA BEACH, FL 32459 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:** LAM

04/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	OFFICER
Name	CORMIER, RICHARD
Address	156 NORTH COUNTY HIGHWAY 393 #7
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	PRESIDENT
Name	DIETRICH, COLEEN
Address	156 NORTH COUNTY HIGHWAY 393 BOX 7
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	VP
Name	JENSEN, WILL
Address	156 NORTH COUNTY HIGHWAY 393 #7
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	OFFICER
Name	ROBINETTE, DAVID
Address	156 NORTH COUNTY HIGHWAY 393 #7
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	OFFICER
Name	SCHRAMKE, LORRAINE
Address	156 NORTH COUNTY HIGHWAY 393 #7
City-State-Zip:	SANTA ROSA BEACH FL 32459

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: COLEEN DIETRICH

PRES

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date