

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07635

Entity Name: THE GABLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763

Current Mailing Address:

24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 US

FEI Number: 59-2862149

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOVETERE, JULIE
24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 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: JULIE LOVETERE

04/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ALBERTO, COHEN
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

Title SD
Name MCCARDLE, MARGARET
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

Title VPD
Name MILLER, DAVID
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

Title TD
Name MITCHELL, SCOTT
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

Title DIR
Name PANDOLFO, CLAIRE
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

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: COHEN ALBERTO

PD

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date