

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001780

Entity Name: CLEARVIEW OAKS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677**Current Mailing Address:**720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677**FEI Number:** 27-2890616**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCANNAVINO, INC.
729 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	BERGMAN, CINDY
Address	720 BROOKER CREEK BLVD. SUITE 206
City-State-Zip:	OLDSMAR FL 34677

Title	D
Name	FAIMALI, DAVID
Address	720 BROOKER CREEK BLVD. SUITE 206
City-State-Zip:	OLDSMAR FL 34677

Title	SD
Name	WATROUS, PEGGY
Address	720 BROOKER CREEK BLVD. SUITE 206
City-State-Zip:	OLDSMAR FL 34677

Title	TD
Name	TEKANCIC, KENNETH
Address	720 BROOKER CREEK BLVD. SUITE 206
City-State-Zip:	OLDSMAR FL 34677

Title	VPD
Name	ABBOTT, WINNIE
Address	720 BROOKER CREEK BLVD. SUITE 206
City-State-Zip:	OLDSMAR FL 34677

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: CINDY BERGMAN**PRESIDENT****01/14/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date