

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10469

**FILED
Apr 11, 2017
Secretary of State
CC9384197093**

Entity Name: EASTBROOK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE 301
ST. PETERSBURG, FL 33702 US

FEI Number: 59-3747384

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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: DENNIS MANSFIELD

04/11/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SCHIRMER, CRAIG
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name BRAUZER, MITCHELL
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER, SECRETARY
Name EDELSON, ELEANOR
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title VP
Name ROSARIO, JUDITH
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name BADILLO, GRACE
Address 9887 FOURTH STREET NORTH
SUITE 301
City-State-Zip: ST. PETERSBURG FL 33702

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: CRAIG SCHIRMER

PRESIDENT

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date