2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12152

Entity Name: ELAN AT CALUSA CONDOMINIUM II ASSOCIATION, INC.

FILED
Mar 17, 2021
Secretary of State
6304234238CC

Current Principal Place of Business:

C/O T&G MANAGEMENT SERVICES, INC. 18001 OLD CUTLER RD SUTIE 476 PALMETTO BAY, FL 33157

Current Mailing Address:

C/O T&G MANAGEMENT SERVICES, INC. 18001 OLD CUTLER RD SUTIE 476 PALMETTO BAY, FL 33157 US

FEI Number: 59-2774609 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLASSFORD, DALE C 12908 SW 133 COURT MIAMI, FL 33186 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: DALE GLASSFORD 03/17/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name SUITE, JASON Name LOPEZ VIDAL, LILLIAN

Address 18001 OLD CUTLER RD Address 18001 OLD CUTLER ROAD

SUITE 476

City-State-Zip: PALMETTO BAY FL 33157 City-State-Zip: PALMETTO BAY FL 33157

Title TREASURER Title SECRETARY

Name BECERRA, ALVARO Name SANTANA, OFELIA

Address T&G MANAGEMENT SERVICES INC Address T&G MANAGEMENT SERVICES, INC.

18001 OLD CUTLER ROAD 476 18001 OLD CUTLER RD SUTIE 476

City-State-Zip: PALMETTO BAY FL 33157 City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR Title DIRECTOR

Name ARCE, GUILLERMO Name YANEZ, MARCO

Address T&G MANAGEMENT SERVICES, INC. Address T&G MANAGEMENT SERVICES, INC.

18001 OLD CUTLER RD SUTIE 476 18001 OLD CUTLER RD SUTIE 476

City-State-Zip: PALMETTO BAY FL 33157 City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR

Name AZUAJE, ALGHIEN

Address T&G MANAGEMENT SERVICES, INC.

18001 OLD CUTLER RD SUTIE 476

City-State-Zip: PALMETTO BAY FL 33157

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: JASON SUITE PRESIDENT 03/17/2021