

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12408

**FILED**  
**Mar 23, 2021**  
**Secretary of State**  
**4703504705CC**

**Entity Name:** COUNTRY ISLES SECTION ONE MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

11784 W SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

11784 W SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 US

**FEI Number: 59-2587731**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 W SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL**

**03/23/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           WAGY, JAMES  
Address        11784 W SAMPLE ROAD  
                  SUITE 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           PRESIDENT  
Name           HAGER, GREGORY  
Address        11784 W SAMPLE ROAD  
                  SUITE 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           VP  
Name           GOMEZ, RICARDO  
Address        11784 W SAMPLE ROAD  
                  SUITE 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           SECRETARY  
Name           ROTH, SHARI  
Address        11784 W SAMPLE ROAD  
                  SUITE 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           DIRECTOR  
Name           LEON, MICHAEL  
Address        11784 W SAMPLE ROAD  
                  SUITE 103  
City-State-Zip: CORAL SPRINGS FL 33065

*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: HAGER , GREGORY**

**PRESIDENT**

**03/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date