CC4601752229
Certificate of Status Desired: No

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14169

HARAN, PATRICK 255 PARADISE BLVD

INDIALANTIC, FL 32903 US

UNIT 38

The above named entity submits this statement for the nurnose of changing its -1 - 44 hath in the Otate of Flavid

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.				
: PATRICK HARAN			02/09/2018	
Electronic Signature of Registered Agent			Date	
ctor Detail :				
DIRECTOR	Title	VP, /ASST. TREASURER		
BEHRMANN, DIANE	Name	YDO, MARIA		
P.O. BOX 033871	Address	P.O. BOX 033871		
INDIALANTIC FL 32903	City-State-Zip:	INDIALANTIC FL 32903		
TREASURER	Title	SECRETARY		
TRAFTON, DONALD R	Name	CORDELLI, WANDA		
P.O. BOX 033871	Address	P. O. BOX 033871		
INDIALANTIC FL 32903	City-State-Zip:	INDIALANTIC FL 32903		
PRESIDENT				
CASTORO, CARLO				
P.O. BOX 033871				
INDIALANTIC FL 32903				
	Electronic Signature of Registered Agent Electronic Signature of Registered Agent DIRECTOR BEHRMANN, DIANE P.O. BOX 033871 INDIALANTIC FL 32903 TREASURER TRAFTON, DONALD R P.O. BOX 033871 INDIALANTIC FL 32903 PRESIDENT CASTORO, CARLO P.O. BOX 033871	PATRICK HARAN Electronic Signature of Registered Agent tor Detail : DIRECTOR Title BEHRMANN, DIANE Name P.O. BOX 033871 Address INDIALANTIC FL 32903 City-State-Zip: TREASURER Title TRAFTON, DONALD R Name P.O. BOX 033871 Address INDIALANTIC FL 32903 City-State-Zip: PRESIDENT CASTORO, CARLO P.O. BOX 033871	PATRICK HARAN Electronic Signature of Registered Agent tor Detail : DIRECTOR Title VP, /ASST. TREASURER BEHRMANN, DIANE Name YDO, MARIA P.O. BOX 033871 Address P.O. BOX 033871 INDIALANTIC FL 32903 City-State-Zip: INDIALANTIC FL 32903 TREASURER Title SECRETARY TRAFTON, DONALD R Name CORDELLI, WANDA P.O. BOX 033871 Address P. O. BOX 033871 INDIALANTIC FL 32903 City-State-Zip: INDIALANTIC FL 32903 PRESIDENT CASTORO, CARLO P.O. BOX 033871	

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.

TREASURER

SIGNATURE: DONALD R. TRAFTON

Electronic Signature of Signing Officer/Director Detail

02/09/2018

FILED Feb 09, 2018 **Secretary of State** Entity Name: TOWN HOMES OF PARADISE PARK OWNERS ASSOCIATION,

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