

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011902

Entity Name: MIRADA PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 26, 2021
Secretary of State
4532410015CC

Current Principal Place of Business:

C/O TROPICAL ISLES MANAGEMENT
12734 KENWOOD LN. STE. 49
FT. MYERS, FL 33907

Current Mailing Address:

C/O TROPICAL ISLES MANAGEMENT
12734 KENWOOD LN. STE. 49
FT. MYERS, FL 33907 US

FEI Number: 81-0849257

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT SERVICES, INC.
C/O TROPICAL ISLES MANAGEMENT
12734 KENWOOD LN. STE. 49
FT. MYERS, FL 33907 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: BRETT RUDLAND

04/26/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name HAJICEK, ROBERT
Address 12734 KENWOOD LANE
SUITE 49
City-State-Zip: FT MYERS FL 33907

Title TREASURER
Name NORTON, KEITH
Address 12734 KENWOOD LANE
SUITE 49
City-State-Zip: FORT MYERS FL 33907

Title PRESIDENT
Name WESTBROOK, MARILYN
Address 12734 KENWOOD LANE
SUITE 49
City-State-Zip: FORT MYERS FL 33907

Title SECRETARY
Name MONASTERO, ROBERT
Address 12734 KENWOOD LANE
SUITE 49
City-State-Zip: FORT MYERS FL 33907

Title DIRECTOR
Name LANZA, JOHN
Address 12734 KENWOOD LANE
SUITE 49
City-State-Zip: FORT MYERS FL 33907

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: MARILYN WESTBROOK

P

04/26/2021

Electronic Signature of Signing Officer/Director Detail

Date