

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17079

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**5719656727CC**

**Entity Name:** THE HOMEOWNERS' ASSOCIATION OF THE PALMS, INC.

**Current Principal Place of Business:**

UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
TAMPA, FL 33619

**Current Mailing Address:**

UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
TAMPA, FL 33619 US

**FEI Number:** 59-2721297

**Certificate of Status Desired:** No

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

DUARTE III, ANTONIO  
6221 LAND O' LAKES BLVD.  
LAND O' LAKES, FL 34638 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:** ANTONIO DUARTE III

03/07/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name WISLER, TINA  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

Title TREASURER  
Name WISLER, JONATHAN  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

Title PRESIDENT  
Name SANCHEZ, SAMUEL  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

Title SECRETARY  
Name BAKER, ARETHA M  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

Title DIRECTOR  
Name OCASIO, PEDRO  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

Title DIRECTOR  
Name BRONNER, GARRY  
Address UNIVERSITY PROPERTIES, INC.  
3018 NORTH U.S. HIGHWAY 301 950  
City-State-Zip: TAMPA FL 33619

*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:** SAMUEL SANCHEZ

PRESIDENT

03/07/2024

Electronic Signature of Signing Officer/Director Detail

Date