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: NATHALIA JIRON

I

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent Officer/Director Detail ·

Officer/Director Detail :				
Title	PRESIDENT	Title	VP	
Name	JIRON, NATHALIA	Name	FONSECA, ALEJANDRO	
Address	23398 SW 108 COURT	Address	23398 SW 108 COURT	
City-State-Zip:	HOMESTEAD, FL FL 33032	City-State-Zip:	HOMESTEAD, FL FL 33032	
Title	SECRETARY, TREASURER			
Name	FIGUEROA, DAIMY			
Address	23398 SW 108 COURT			
City-State-Zip:	HOMESTEAD, FL FL 33032			

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: CELENA R NASH

7301 WILES ROAD SUITE 202 CORAL SPRINGS, FL 33067 US

### **Current Mailing Address:**

DOCUMENT# N18000005391

ASSOCIATION, INC.

23398 SW 108 COURT HOMESTEAD, FL, FL 33032

23398 SW 108 COURT HOMESTEAD, FL, FL 33032 US

**Current Principal Place of Business:** 

## **FEI Number: NOT APPLICABLE**

# Name and Address of Current Registered Agent:

NASH, CELENA R PA

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE ISLES AT THE LANDINGS NEIGHBORHOOD

### FILED Jan 23, 2024 Secretary of State 6807367416CC

01/23/2024 Date

Certificate of Status Desired: No