

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18476

**FILED
Mar 16, 2017
Secretary of State
CC2919195587**

Entity Name: CARILLON WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD #101
FT. MYERS, FL 33912

Current Mailing Address:

C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD #101
FT. MYERS, FL 33912 US

FEI Number: 59-2767642

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST
C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD #101
FT. MYERS, FL 33912 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: MICHAEL FLEMING

03/16/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WEEKS, ANNEMARIE
Address C/O ASSOCIA GULF COAST
 13461 PARKER COMMONS BLVD #101

City-State-Zip: FT. MYERS FL 33912

Title TD
Name SOHN, MICHAEL
Address C/O ASSOCIA GULF COAST
 13461 PARKER COMMONS BLVD #101

City-State-Zip: FT. MYERS FL 33912

Title SECRETARY
Name DRAKE, DREW
Address C/O ASSOCIA GULF COAST
 13461 PARKER COMMONS BLVD #101

City-State-Zip: FT. MYERS FL 33912

Title VP
Name KEARNS, KEVIN
Address C/O ASSOCIA GULF COAST
 13461 PARKER COMMONS BLVD #101

City-State-Zip: FT. MYERS FL 33912

Title DIRECTOR
Name MAHAN, RONALD
Address C/O ASSOCIA GULF COAST
 13461 PARKER COMMONS BLVD #101

City-State-Zip: FT. MYERS FL 33912

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: ANNEMARIE WEEKS

PRESIDENT

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date