2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2025
Secretary of State
1781514131CC

DOCUMENT# N21939

Entity Name: COLLEGE PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1901 W COLONIAL DRIVE
FIRST FLOOR
ORLANDO, FL 32804

Current Mailing Address:

P. O. BOX 540859
ORLANDO, FL 32854 US

FEI Number: 59-2911391

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

L.T.S.C., LLC
1901 W COLONIAL DRIVE
FIRST FLOOR
ORLANDO, FL 32804 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: JOSEPH E. SEAGLE, MANAGER 04/02/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	FETTIG, ANGELA
Address	P. O. BOX 540859
City-State-Zip:	ORLANDO FL 32854

Title	VP, DIRECTOR
Name	SUTTON, DUSTY
Address	P. O. BOX 540859
City-State-Zip:	ORLANDO FL 32854

Title	DIRECTOR
Name	WILSTRUP, LISA
Address	P. O. BOX 540859
City-State-Zip:	ORLANDO FL 32854

Title	DIRECTOR
Name	COPELAND, YOLANDA
Address	P. O. BOX 540859
City-State-Zip:	ORLANDO FL 32854

Title	DIRECTOR, SECRETARY
Name	SEAGLE, JOSEPH E
Address	P. O. BOX 547945
City-State-Zip:	ORLANDO FL 32854

Title	TREASURER, DIRECTOR
Name	ORBEGOSO, CHAMIE
Address	P. O. BOX 540859
City-State-Zip:	ORLANDO FL 32854

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: JOSEPH E SEAGLE SECRETARY 04/02/2025

Electronic Signature of Signing Officer/Director Detail — Date