

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28220

Entity Name: AVONDALE RESIDENTS ASSOCIATION, INC.**Current Principal Place of Business:**1810 LINCOLN DRIVE
ATTN: JODIE VASHISTHA
SARASOTA, FL 34236**Current Mailing Address:**1810 LINCOLN DRIVE
ATTN: JODIE VASHISTHA
SARASOTA, FL 34236 US**FEI Number:** 65-0070732**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VASHISTHA, JODIE E
1810 LINCOLN DRIVE
ATTN: JODIE VASHISTHA
SARASOTA, FL 34236 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:** JODIE E VASHISTHA

02/16/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ANDERSON, DEAN
Address 1932 IRVING ST.
City-State-Zip: SARASOTA FL 34236

Title SECRETARY
Name HOFF, ROB
Address 1930 ALTA VISTA STREET
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name CARDAMONE, MOLLIE
Address 1116 YALE AVENUE
City-State-Zip: SARASOTA FL 34236

Title TREASURER
Name VASHISTHA, JODIE
Address 1810 LINCOLN DRIVE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name FOURNIER, CAROL
Address 1124 BREWER PLACE
City-State-Zip: SARASOTA FL 34236

Title VP
Name BAKER, PAM
Address 1900 LINCOLN DR
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name RIESENBECK, CONNIE
Address 1115 S. OSPREY AVE.
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name SALAVERRI, GEORGIA
Address 1115 YALE ST
City-State-Zip: SARASOTA FL 34236

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: JODIE E. VASHISTHA**TREASURER**

02/16/2022

Electronic Signature of Signing Officer/Director Detail

Date