

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

DOCUMENT# N30558

**Entity Name:** ANDALUCIA MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

3903 NORTHDAL BLVD #250W  
TAMPA, FL 33624

**Current Mailing Address:**

WISE PROPERTY MANAGEMENT  
3903 NORTHDAL BLVD #250W  
TAMPA, FL 33624 US

**FEI Number:** 59-3005430

**Certificate of Status Desired:** No

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

GLAUSIER, CHARLES EVANS  
400 N. ASHLEY DR. - STE. 2020  
TAMPA, FL 33602 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:** CHARLES EVANS GLAUSIER

04/29/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name CHIPMAN, JOSEPH  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title DIRECTOR  
Name PUNGELLO, RICHARD T  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title DIRECTOR  
Name SPLITZ, ANDREW  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title DIRECTOR  
Name COLE, ANGELINA  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title TREASURER  
Name WAY, JEREMY  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title PRESIDENT  
Name MALARZ, MARILYN  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

Title VP  
Name O'BRIEN, EVA  
Address 3903 NORTHDAL BLVD #250W  
City-State-Zip: TAMPA FL 33624

*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:** MALARZ , MARILYN

PRESIDENT

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date