#### 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: DONALD FLYNN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

#### 04/22/2024

## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N36630

Entity Name: CARRIAGE CROSSING ASSOCIATION, INC.

# **Current Principal Place of Business:**

12058 SAN JOSE BLVD. STE 904 JACKSONVILLE, FL 32223

## **Current Mailing Address:**

P.O. BOX 600033 JACKSONVILLE, FL 32260 US

# FEI Number: 59-2999021

# Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT PARTNERS & ASSOCIATES, INC. 12058 SAN JOSE BLVD. STE 904 JACKSONVILLE, FL 32223 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	E: ELAINE BROOKS			04/22/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	VP	Title	PRESIDENT	
Name	CLINE, MICHAEL	Name	FLYNN, DONALD	
Address	P.O. BOX 600033	Address	P.O. BOX 600033	
City-State-Zip:	JACKSONVILLE FL 32260	City-State-Zip:	JACKSONVILLE FL 32260	
Title	TREASURER	Title	DIRECTOR	
Name	ST. PIERRE, JACOB	Name	TYNER, EMILY	
Address	P.O. BOX 600033	Address	P.O. BOX 600033	
City-State-Zip:	JACKSONVILLE FL 32260	City-State-Zip:	JACKSONVILLE FL 32260	

Certificate of Status Desired: No

Secretary of State 5615430595CC

FILED Apr 22, 2024

Date