

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39123

Entity Name: CHARLESTON CORNERS PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Apr 28, 2020
Secretary of State
0069158639CC**Current Principal Place of Business:**5523 W CYPRESS
SUITE 102
TAMPA, FL 33607**Current Mailing Address:**P O BOX 803555
DALLAS, TX 75380 US**FEI Number: 59-3080537****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEMS
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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: LAURA JONES****04/28/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** TREASURER
Name ROGERS, ROBERT
Address 5523 W CYPRESS
SUITE 102
City-State-Zip: TAMPA FL 33607**Title** VP
Name LAPLANTE, NYDIA
Address 5523 W CYPRESS
SUITE 102
City-State-Zip: TAMPA FL 33607**Title** SECRETARY
Name TOTOKY, MELANIE
Address 5523 W CYPRESS
SUITE 102
City-State-Zip: TAMPA FL 33607**Title** PRESIDENT
Name PHILLIPS, GARY
Address 5523 W CYPRESS
SUITE 102
City-State-Zip: TAMPA FL 33607**Title** DIRECTOR
Name SMALL, GEORGE
Address 5523 W CYPRESS
SUITE 102
City-State-Zip: TAMPA FL 33607

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: GARY PHILLIPS**PRESIDENT****04/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date