2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002934

Entity Name: LAUREL WOODS PROPERTY OWNERS' ASSOCIATION, INC.

FILED Feb 10, 2021 **Secretary of State** 2781909829CC

Current Principal Place of Business:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

Current Mailing Address:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 US

FEI Number: 59-3236778 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT, LLC 212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 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: CHRISTINE M TRIMMER 02/10/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title **TREASURER** Title **PRESIDENT**

KITZMILLER, RICHARD KENNICUTT, ROGER Name Name

C/O COMMUNITIES FIRST C/O COMMUNITIES FIRST Address Address

ASSOCIATION MANAGEMENT LLC ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD 212 APOLLO BEACH BLVD

APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 City-State-Zip: City-State-Zip:

VΡ **DIRECTOR** Title Title

GOODENOW, KEVIN Name MAFFETT, JIM Name

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD 212 APOLLO BEACH BLVD

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY Title LICENSED COMMUNITY

ASSOCIATION MANAGER SHAFFER, EVERETT

Name Name TRIMMER, KATHY

Address C/O COMMUNITIES FIRST C/O COMMUNITIES FIRST Address ASSOCIATION MANAGEMENT LLC

ASSOCIATION MANAGEMENT LLC 212 APOLLO BEACH BLVD

APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip:

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: KATHY TRIMMER

LICENSED COMMUNITY ASSOCIATION MANAGER

02/10/2021