

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001465

**Entity Name:** SAUSALITO PLACE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O CAMPBELL PROPERTY MGMT  
9897 LAKE WORTH RD SUITE 304  
LAKE WORTH, FL 33467**Current Mailing Address:**C/O CAMPBELL PROPERTY MGMT  
9897 LAKE WORTH RD SUITE 304  
LAKE WORTH, FL 33467 US**FEI Number: 59-3508351****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**STOLOFF, SCOTT A  
STOLOFF & MANOFF, P.A.  
1818 AUSTRALIAN AVE. SOUTH, SUITE 400  
WEST PALM BEACH, FL 33409 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	FALZONE, ROBERT
Address	C/O CAMPBELL PROPERTY MGMT 9897 LAKE WORTH RD SUITE 304
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	ENGLERT, RALPH
Address	C/O CAMPBELL PROPERTY MGMT 9897 LAKE WORTH RD SUITE 304
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	SALIMBENE, GEORGE
Address	C/O CAMPBELL PROPERTY MGMT 9897 LAKE WORTH RD SUITE 304
City-State-Zip:	LAKE WORTH FL 33467

Title	SECRETARY
Name	AUSTIN, KAREN
Address	C/O CAMPBELL PROPERTY MGMT 9897 LAKE WORTH RD SUITE 304
City-State-Zip:	LAKE WORTH FL 33467

Title	TREASURER
Name	DEGAPERIS, PATRICK
Address	C/O CAMPBELL PROPERTY MGMT 9897 LAKE WORTH RD SUITE 304
City-State-Zip:	LAKE WORTH FL 33467

*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: ROBERT FALZONE****PRESIDENT****03/17/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date