

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005894

**FILED**  
**Mar 05, 2019**  
**Secretary of State**  
**5775963287CC**

**Entity Name:** TOWNHOMES BY THE GULF AT SAND PEBBLE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6454 RIDGE RD  
PORT RICHEY, FL 34668

**Current Mailing Address:**

PO BOX 1407  
PORT RICHEY, FL 34673 US

**FEI Number: 59-3522954**

**Certificate of Status Desired: No**

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

COASTAL HOA MANAGEMENT SERVICES, INC.  
6454 RIDGE RD  
PORT RICHEY, FL 34668 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: MARYANN SYRASKI**

**03/05/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name O'NEILL, STEVEN  
Address PO BOX 1407  
City-State-Zip: PORT RICHEY FL 34673

Title PRESIDENT  
Name STACHELAK , JOE  
Address PO BOX 1407  
City-State-Zip: PORT RICHEY FL 34673

Title D  
Name STACHELEK, JOSEPH  
Address PO BOX 1407  
City-State-Zip: PORT RICHEY FL 34673

Title VP  
Name KINSELLA, TOM  
Address PO BOX 1407  
City-State-Zip: PORT RICHEY FL 34673

Title TREASURER  
Name JONES, PATRICIA  
Address PO BOX 1407  
City-State-Zip: PORT RICHEY FL 34673

*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: STACHELAK , JOE**

**PRE**

**03/05/2019**

Electronic Signature of Signing Officer/Director Detail

Date