#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005894

Entity Name: TOWNHOMES BY THE GULF AT SAND PEBBLE

HOMEOWNERS ASSOCIATION, INC.

FILED Apr 20, 2015 Secretary of State CC3048045982

# **Current Principal Place of Business:**

5837 TROUBLE CREEK ROAD NEW PORT RICHEY, FL 34652

## **Current Mailing Address:**

5837 TROUBLE CREEK ROAD NEW PORT RICHEY, FL 34652

FEI Number: 59-3522954 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT SERVICES, INC. 5837 TROUBLE CREEK RD NEW PORT RICHEY, FL 34652 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 Title SD

Name O'NEILL, STEVEN Name DOLMAN, DOROTHY

Address 5837 TROUBLE CREEK ROAD Address 5837 TROUBLE CREEK ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title D Title VF

Name STACHELEK, JOSEPH Name BERNSTEIN, BOB

Address 5837 TROUBLE CREEK ROAD Address 5837 TROUBLE CREEK ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title TREASURER
Name JONES, PATRICIA

Address 5837 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

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: STEVEN O'NEILL

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/20/2015 Date