

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001604

**FILED**  
**Apr 09, 2021**  
**Secretary of State**  
**9351962073CC**

**Entity Name:** EAGLES POINT AT THE LANDINGS IV CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5450 EAGLES POINT CIR.  
SARASOTA, FL 34231

**Current Mailing Address:**

4370 S. TAMIAMI TRAIL  
102  
SARASOTA, FL 34231 US

**FEI Number:** 65-0854744

**Certificate of Status Desired:** No

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

CASEY CONDOMINIUM MANAGEMENT  
4370 S. TAMIAMI TRAIL  
#102  
SARASOTA, FL 34231 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            PEIKOFF , MICHAEL  
Address        5450 EAGLES POINT CIR.  
                  #401  
City-State-Zip: SARASOTA FL 34231

Title            ASST. SECRETARY  
Name            SPENCE, BRIDGET  
Address        4370 SOUTH TAMIAMI TRAIL #102  
City-State-Zip: SARASOTA FL 34231

Title            SECRETARY, TREASURER  
Name            AGNES, SCHIPPER  
Address        4370 S. TAMIAMI TRAIL  
                  102  
City-State-Zip: SARASOTA FL 34231

Title            VP  
Name            MARAVAL, PHILIPPE  
Address        4370 S. TAMIAMI TRAIL  
                  102  
City-State-Zip: SARASOTA FL 34231

*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:** BRIDGET SPENCE

**RA**

**04/09/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date