

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004380

**FILED**  
**Mar 03, 2017**  
**Secretary of State**  
**CC8136782480**

**Entity Name:** LIBRARY MEWS ON THE SQUARE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

40 SARASOTA CENTER BLVD #108A  
SARASOTA, FL 34240

**Current Mailing Address:**

40 SARASOTA CENTER BLVD #108A  
SARASOTA, FL 34240 US

**FEI Number:** 65-0893659

**Certificate of Status Desired:** No

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

CMR PROPERTY MANAGEMENT  
40 SARASOTA CENTER BLVD #108A  
SARASOTA, FL 34240 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 DIRECTOR, SECRETARY

Name GARCIA, MARTIN

Address 40 SARASOTA CENTER BLVD #108A

City-State-Zip: SARASOTA FL 34240

Title PRESIDENT, DIRECTOR

Name MICHEL, JOHN

Address 40 SARASOTA CENTER BLVD., 108A

City-State-Zip: SARASOTA FL 34240

Title DIRECTOR, TREASURER

Name GROTKE, DENNIS

Address 40 SARASOTA CENTER BLVD., 108A

City-State-Zip: SARASOTA FL 34240

*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:** JOHN MICHEL

**PRESIDENT**

**03/03/2017**

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

\_\_\_\_\_  
Date