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

**FILED**
**Mar 07, 2019**
**Secretary of State**
**1258172748CC**

DOCUMENT# N99000001881

**Entity Name:** 1850 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2259 SARASOTA CENTER BLVD.
SARASOTA, FL 34240

**Current Mailing Address:**

2259 SARASOTA CENTER BLVD.
SARASOTA, FL 34240 US

**FEI Number: 65-0979997**

**Certificate of Status Desired:** No

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

PRIME COMMERCIAL LLC
2259 SARASOTA CENTER BLVD.
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: CAROLYNN GARCIA 03/07/2019

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | |
|---|---|
| Title | PRESIDENT, DIRECTOR |
| Name | YODER, CARY |
| Address | 1850 PORTER LAKE DRIVE #106 |
| City-State-Zip: | SARASOTA FL 34240 |

| | |
|---|---|
| Title | VP, DIRECTOR |
| Name | DYNAN, ROB |
| Address | 1850 PORTER LAKE DRIVE #108 |
| City-State-Zip: | SARASOTA FL 34240 |

| | |
|---|---|
| Title | SECRETARY, TREASURER, DIRECTOR |
| Name | HANNOLD, MICHELLE |
| Address | 1850 PORTER LAKE RD. #101 |
| 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: CARY YODER P 03/07/2019

Electronic Signature of Signing Officer/Director Detail — Date