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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: JERRY LIEDEL PRESIDENT

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

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:

Name

Address

	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	TREASURER	Title	Р
Name	HUNT, SAUNDRA	Name	LIEDEL, JERRY
Address	7880 54TH AVE N 40	Address	7880-54TH AVE N. 87
City-State-Zip:	SAINT PETERSBURG FL 33709	City-State-Zip:	SAINT PETERSBURG FL 33709
Title	D	Title	D/VP
Name	LUCAS, CHARLES	Name	SCHNELL, DONALD
Address	7880-54TH AVE. N. #138	Address	7880 54TH AVENUE, NORTH #122
City-State-Zip:	SAINT PETERSBURG FL 33709	City-State-Zip:	ST. PETERSBURG FL 33709
Title	DIRECTOR	Title	SECRETARY
Name	MILLER, JOHN	Name	SCHONERT, SHERRY
Address	7880 54TH AVE N #131	Address	7880 54TH AVE N. 94
City-State-Zip:	ST. PETERSBURG FL 33709	City-State-Zip:	ST. PETERSBURG FL 33709
Title	DIRECTOR		

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.

### Name and Address of Current Registered Agent:

LARGO, FL 33773 US

ARMITAGE, DAVID

7880 54TH AVE N

City-State-Zip: ST. PETERSBURG FL 33709

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# **Current Mailing Address:**

SAINT PETERSBURG, FL 33709

11350 66TH ST N SUITE 124 LARGO, FL 33773 US

DOCUMENT# H54886

7880-54 AVE. N.

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT** 

Entity Name: CLUB CHALET COOPERATIVE ASSOCIATION, INC.

**Current Principal Place of Business:** 

## FEI Number: 59-2538352

HOLIDAY ISLES PROPERTY MANAGEMENT 11350 66TH ST N SUITE 124

Certificate of Status Desired: No

03/26/2020

Date