

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716374

Entity Name: CHATEAUX DE BARDMOOR CONDOMINIUM OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**7300 PARK STREET
SEMINOLE, FL 33777**Current Mailing Address:**C/O RESOURCE PROPERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 US**FEI Number: 59-3041763****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RABIN & PARKER, P.A.
28059 US HWY 19 N
SUITE 301
CLEARWATER, FL 33761 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:** RABIN & PARKER, P.A.

05/04/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PICOTTE, HOWARD
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title VICE PRESIDENT
Name SLATIC, BILL
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title SECRETARY
Name VESCOVI, CHERYL
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title TREASURER
Name KAY, JEFF
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name BURKHOLDER, MOLLY
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name KERKER, RAY
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name REHBERG, CATHERINE
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name WHITTINGTON, CHARLIE
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

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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: HOWARD PICOTTE

PRESIDENT

05/04/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SANFORD, RICHARD
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777