

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719089

**Entity Name:** NORMANDY HOMEOWNERS ASSOC., INC.**Current Principal Place of Business:**1686 S LAKE AVE  
CLEARWATER, FL 33756**Current Mailing Address:**C/O ASSOCIA GULF COAST  
9887 4TH ST N STE 301  
SAINT PETERSBURG, FL 33702 US**FEI Number:** 59-1312114**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASSOCIA GULF COAST  
9887 4TH ST N STE 301  
SAINT PETERSBURG, FL 33702 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:** DENNIS MANSFIELD

02/02/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           SEITZ, PATRICIA  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            VP  
Name           MESSER, DONALD  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            TREASURER  
Name           SEITZ, PATRICIA  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            SECRETARY  
Name           FOLWELL, MARTHA  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            DIRECTOR  
Name           CHRISTOPHER, ROBERT  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            DIRECTOR  
Name           WILLETS, WARREN  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

Title            DIRECTOR  
Name           LONG, THOMAS  
Address        C/O ASSOCIA GULF COAST  
                  9887 4TH ST N STE 301  
City-State-Zip: SAINT PETERSBURG FL 33702

*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:** PATRICIA SEITZ

PRESIDENT

02/02/2018

Electronic Signature of Signing Officer/Director Detail

Date