

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719180

Entity Name: KALMIA CONDOMINIUM NO. 5, INC.

FILED
Mar 23, 2023
Secretary of State
6545117368CC

Current Principal Place of Business:

C/O RESOURCE PROPERTY MANAGEMENT
5901 SUN BLVD SUITE 103
ST PETERSBURG, FL 33715

Current Mailing Address:

C/O RESOURCE PROPERTY MANAGEMENT
5901 SUN BLVD SUITE 103
ST PETERSBURG, FL 33715 US

FEI Number: 59-1673186

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RABIN/PARKER
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

03/23/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name DRIMMER, RONNI
Address C/O RESOURCE PROPERTY
MANAGEMENT
5901 SUN BLVD SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title VP
Name HUDEPOHL, VINCE
Address C/O RESOURCE PROPERTY
MANAGEMENT
5901 SUN BLVD SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title SEC
Name WHITE, CINDY
Address C/O RESOURCE PROPERTY
MANAGEMENT
5901 SUN BLVD SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title TREA
Name SMITH, STEVE
Address C/O RESOURCE PROPERTY
MANAGEMENT
5901 SUN BLVD SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title DIRECTOR
Name DAY, CHUCK
Address C/O RESOURCE PROPERTY
MANAGEMENT
5901 SUN BLVD SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title DIRECTOR
Name HANNA, MERLE
Address 5901 SUN BLVD. STE 103
City-State-Zip: PETERSBURG FL 33715

Title DIRECTOR
Name WHITE, MALCOM
Address 5901 SUN BLVD. STE 103
City-State-Zip: PETERSBURG FL 33715

Title DIRECTOR
Name WEITLAUF, CONSTANCE
Address 5901 SUN BLVD. STE 103
City-State-Zip: PETERSBURG FL 33715

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: RONNI DRIMMER

PRESIDENT

03/23/2023

Electronic Signature of Signing Officer/Director Detail

Date