

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720941

FILED
Apr 13, 2016
Secretary of State
CC4635145593

Entity Name: DOUGLAS ARMS APARTMENT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

FEI Number: 59-1460969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REARDON, MAUREEN C.
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name WHEELER, ROBERT
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title VP
Name VILCHES, ELAINE
Address 4151 WOODLANDS PARWAY
City-State-Zip: PALM HARBOR FL 34685

Title SEC
Name ALBERG, JANICE
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title TREA
Name MONELLO, SAL
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title D
Name WHEELER, ROBERT
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title D
Name VILCHES, ELAINE
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name LAMOREAUX, BILL
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name RITTER, MARY
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

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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: ROBERT WHEELER

PRESIDENT

04/13/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALLACE, IVAN
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name GANZEL, JACK
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name HICKMAN, JIM
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name SANTULLI, EDITH
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685