

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746257

**Entity Name:** LIDO TOWERS OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1001 BENJAMIN FRANKLIN DR.  
SARASOTA, FL 34236**Current Mailing Address:**C/O CASEY CONDOMINIUM MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
SARASOTA, FL 34231 US**FEI Number:** 59-2013730**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASEY CONDOMINIUM MANAGEMENT  
CASEY CONDOMINIUM MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
SARASOTA, FL 34231 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:** BRIDGET SPENCE

04/08/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MINTON, JAMES  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT  
Name GETZ, JAMES  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title SECRETARY  
Name LEHMAN, ROBIN  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title TREASURER  
Name PLAUTZ, DENNIS  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR  
Name HICKOK, NANCY  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title ASST. SECRETARY  
Name SPENCE, BRIDGET  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

Title VP  
Name LEBOWITZ, PHILIP  
Address 4370 S. TAMIAMI TRAIL  
SUITE 102  
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR  
Name MANNING, BILL  
Address C/O CASEY CONDOMINIUM  
MANAGEMENT  
4370 SOUTH TAMIAMI TRAIL, #102  
City-State-Zip: SARASOTA FL 34231

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:** BRIDGET SPENCE

ASST SECRETARY

04/08/2021

Electronic Signature of Signing Officer/Director Detail

Date