2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750125

Entity Name: VILLA MADEIRA CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 23, 2025
Secretary of State
6450873314CC

Current Principal Place of Business:

C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET SEMINOLE, FL 33777

Current Mailing Address:

C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET SEMINOLE, FL 33777 US

FEI Number: 59-2222487 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RABIN, PARKER, GURLEY, PA 2653 MCCORMICK DR CLEARWATER, FL 33759 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: BEN RABIN, PA 04/23/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT Title VP

Name SMITH, RAY Name O'SHANE, GRAIG

Address C/O RESOURCE PROPERTY Address C/O RESOURCE PROPERTY

MANAGEMENT
7300 PARK STREET

MANAGEMENT
7300 PARK STREET

SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

Title SECRETARY Title TREASURER

Name BASSO, JOANNE Name MURPHY, CHERYL

Address C/O RESOURCE PROPERTY Address C/O RESOURCE PROPERTY

MANAGEMENT MANAGEMENT 7300 PARK STREET 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

TitleDIRECTORTitleDIRECTORNameJARRETT, BRYANNameKALLER, RITA

Address C/O RESOURCE PROPERTY Address C/O RESOURCE PROPERTY

MANAGEMENT Address 6/5 RESOURCETT

7300 PARK STREET 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name HEATH, DANIEL

Address C/O RESOURCE PROPERTY

C/O RESOURCE PROPERTY MANAGEMENT

7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777

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: RAY SMITH PRESIDENT 04/23/2025