2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759305

Entity Name: LITTLE HARBOR PROPERTY OWNERS' ASSOCIATION, INC.

FILED Feb 22, 2023 **Secretary of State** 2419152839CC

Current Principal Place of Business:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

Current Mailing Address:

235 APOLLO BEACH BLVD #417

APOLLO BEACH, FL 33572 US

FEI Number: 59-2511878 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT, LLC 212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 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: CHRISTINE TRIMMER 02/22/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Name

City-State-Zip:

Title

BROWN, IAN

SECRETARY

Title ٧P Title LICENSED COMMUNITY

ASSOCIATION MANAGER

C/O COMMUNITIES FIRST

Name TRIMMER, CHRISTINE Address C/O COMMUNITIES FIRST

C/O COMMUNITIES FIRST Address ASSOCIATION MANAGEMENT

ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417 235 APOLLO BEACH BLVD #417

APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip:

Title **PRESIDENT**

Title **TREASURER** WANNINGER, KENT Name Name

GARCIA, TONY C/O COMMUNITIES FIRST Address

> ASSOCIATION MANAGEMENT ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417

235 APOLLO BEACH BLVD #417

Address

APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Title **DIRECTOR** Name CRONIN, MICHAEL

Name PETERSON, BRETT Address C/O COMMUNITIES FIRST

C/O COMMUNITIES FIRST Address ASSOCIATION MANAGEMENT

ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417

235 APOLLO BEACH BLVD #417 APOLLO BEACH FL 33572

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip:

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.

02/22/2023 SIGNATURE: CHRISTINE TRIMMER LICENSED COMMUNITY ASSOCIATION MANAGER

Electronic Signature of Signing Officer/Director Detail

Date