

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762670

FILED
Mar 13, 2019
Secretary of State
8304119565CC**Entity Name:** CONDOMINIUM ON THE BAY MANAGEMENT CORPORATION,
INC.**Current Principal Place of Business:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR N STE 100
ST. PETERSBURG, FL 33716**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR N STE 100
ST. PETERSBURG, FL 33716 US**FEI Number: 59-2181548****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOBECK & HANSON PA
2033 MAIN ST
STE 403
SARASOTA, FL 34237 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: DAN LOBECK****03/13/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	SCHOCH, TIMOTHY D
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	SECRETARY
Name	MOFFITT, DONNA
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	T
Name	ROBERT, FINGER
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	DIRECTOR
Name	LYNCH, MARK
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	VP
Name	YODER, PAUL
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100
City-State-Zip:	ST. PETERSBURG FL 33716

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: TIMOTHY SCHOCH**PRESIDENT****03/13/2019**

Electronic Signature of Signing Officer/Director Detail

Date