

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766169

Entity Name: LAS CASITAS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**175 TONEY PENNA DRIVE
SUITE 100
JUPITER , FL 33458**Current Mailing Address:**C/O TRITON PROPERTY MANAGEMENT
175 TONEY PENNA DRIVE SUITE 100
JUPITER , FL 33458 US**FEI Number:** 59-2244201**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRATEN, STEVE
ROSENBAUM PLLC
250 S. AUSTRALIAN AVENUE 5TH FLOOR
WEST PALM BEACH , FL 33401 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:** STEVE BRATEN

05/09/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ULANOWSKI, MARC
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	DIRECTOR
Name	PEPER , MARCIA
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	SECRETARY
Name	DENEKE, TINA
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	DIRECTOR
Name	KUSKO , KAREN
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	TREASURER
Name	MEYER, RICHARD
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	VP
Name	JACCOMA, SUE
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

Title	DIRECTOR
Name	MULLINS, PAM
Address	C/O TRITON PROPERTY MANAGEMENT 175 TONEY PENNA DRIVE SUITE 100

City-State-Zip: JUPITER FL 33458

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 seal, that I am an officer, director, or authorized agent of 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: MARC ULANOWSKI

PRESIDENT

05/09/2023

Electronic Signature of Signing Officer/Director Detail

Date