2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 767823

Entity Name: PARKSIDE VILLAS HOMEOWNERS ASSOCIATION, INC.

FILED
Aug 01, 2023
Secretary of State
5603520695CC

Current Principal Place of Business:

CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762

Current Mailing Address:

CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762 US

FEI Number: 59-2377593 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONDOMINIUM ASSOCIATES CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762 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: CONDOMINIUM ASSOCIATES 08/01/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 TREASURER

 Name
 MEYERS, JOHN
 Name
 DAVIS, SHARON

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title SECRETARY Title VP

Name POOLE, AMY Name ARMSTRONG, THOMAS

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR Title DIRECTOR

Name JABER, SAMER Name DUQUE, GERARDO

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name PUGH. ROBYN

Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762

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: MEYERS, JOHN PRESIDENT 08/01/2023