

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000003696

**FILED**  
**Apr 28, 2023**  
**Secretary of State**  
**3729760566CC**

**Entity Name:** VIZCAYA AT PALM-AIRE TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O T & G MANAGEMENT SERVICES INC  
18001 OLD CUTLER ROAD 476  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

C/O T & G MANAGEMENT SERVICES INC  
18001 OLD CUTLER ROAD 476  
PALMETTO BAY, FL 33157 US

**FEI Number: 32-0061561**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KENNEDY, KEVIN  
KEVIN M. KENNEDY, P.A.  
2101 NW CORPORATE BLVD SUITE 410  
BOCA RAON, FL 33431 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:** /KEVIN KENNEDY

**04/28/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KOLIN, YURIY  
Address        C/O T & G MANAGEMENT SERVICES  
                  INC  
                  18001 OLD CUTLER ROAD 476  
City-State-Zip: PALMETTO BAY FL 33157

Title            TREASURER  
Name            PANAGAKOS, CHRISTIAN  
Address        C/O T & G MANAGEMENT SERVICES  
                  INC  
                  18001 OLD CUTLER ROAD 476  
City-State-Zip: PALMETTO BAY FL 33157

Title            SECRETARY  
Name            KRINSKY, JOSHUA  
Address        C/O T & G MANAGEMENT SERVICES  
                  INC  
                  18001 OLD CUTLER ROAD 476  
City-State-Zip: PALMETTO BAY FL 33157

Title            VP  
Name            KENNEDY , WILLIAM  
Address        C/O T & G MANAGEMENT SERVICES  
                  INC.  
                  18001 OLD CUTLER ROAD 476  
City-State-Zip: PALMETTO BAY FL 33157

Title            DIRECTOR  
Name            RODRIGUEZ , JORGE  
Address        18001 OLD CUTLER ROAD  
                  476  
City-State-Zip: PALMETTO BAY FL 33157

*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:** KRINSKY , JOSHUA

**SECRETARY**

**04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date