2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2025
Secretary of State
8105492047CC

DOCUMENT# N02000004151

Entity Name: CHIMNEY LAKES OFFICE CENTER OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7855 ARGYLE FOREST BLVD
JACKSONVILLE, FL 32244

Current Mailing Address:

3545 ST JOHNS BLUFF ROAD S
#301
JACKSONVILLE, FL 32224

FEI Number: 75-3067091

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLOMGREN, DAWN
3545 ST JOHNS BLUFF ROAD S
#301
JACKSONVILLE, FL 32224 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: DAWN BLOMGREN 02/02/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	MEININGER, FRANK	Name	ZECCARDI, ADAM DR.
Address	3545 ST JOHNS BLUFF ROAD S #301	Address	3545 ST JOHNS BLUFF ROAD SOUTH #301
City-State-Zip:	JACKSONVILLE FL 32224	City-State-Zip:	JACKSONVILLE FL 32224
Title	TREASURER	Title	SECRETARY
Name	BADDAM, SATISH	Name	SHEA, RHEA
Address	3545 ST JOHNS BLUFF ROAD S #301	Address	3545 ST JOHNS BLUFF ROAD S #301
City-State-Zip:	JACKSONVILLE FL 32224	City-State-Zip:	JACKSONVILLE FL 32224

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: MEININGER , FRANK PRESIDENT 02/02/2025

Electronic Signature of Signing Officer/Director Detail — Date