Entity Name: THE TOWNHOMES AT LITTLE HARBOR HOMEOWNERS ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

Current Mailing Address:

DOCUMENT# N02000007753

C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417 APOLLO BEACH, FL 33572 US

FEI Number: 20-1165907

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD#417 APOLLO BEACH, FL 33572 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: CHRISTINE TRIMMER

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	VP	Title	TREASURER	
Name	MADDEN, MARY	Name	JAMES, PATRICIA	
Address	C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417	Address	C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD#417	
City-State-Zip:	APOLLO BEACH FL 33572	City-State-Zip:	APOLLO BEACH FL 33572	
Title	PRESIDENT	Title	SECRETARY	
Name	WANNINGER, KENT	Name	LEVINE, MICHAEL	
Address	C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417	Address	C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD#417	
City-State-Zip:	APOLLO BEACH FL 33572	City-State-Zip:	APOLLO BEACH FL 33572	
Title Name	DIRECTOR SPERO, NATHAN	Title	LICENSED COMMUNITY ASSOCIATION MANAGER	
Address	C/O COMMUNITIES FIRST	Name	TRIMMER, CHRISTINE	
	ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417	Address	C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT 235 APOLLO BEACH BLVD #417	
City-State-Zip:	APOLLO BEACH FL 33572	City-State-Zip:	APOLLO BEACH FL 33572	

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: CHRISTINE TRIMMER

LICENSED COMMUNITY 04/22/2022 ASSOCIATION MANAGER

Electronic Signature of Signing Officer/Director Detail

04/22/2022 Date

Certificate of Status Desired: No