

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002409

Entity Name: TOWNHOMES AT LAKE AVENUE ASSOCIATION, INC.**Current Principal Place of Business:**28870 US HIGHWAY 19 NORTH
SUITE 327
CLEARWATER, FL 33761**Current Mailing Address:**28870 US HIGHWAY 19 NORTH
SUITE 327
CLEARWATER, FL 33761 US**FEI Number:** 01-0756684**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ELITE PROPERTY MANAGEMENT
28870 US HIGHWAY 19 NORTH
SUITE 327
CLEARWATER, FL 33761 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:** WENDY GREENAWAY

04/24/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name WILLIS, JEFF
Address PINELLAS PROFESSIONAL CENTER
7800 66TH STREET N. #205
City-State-Zip: PINELLAS PARK FL 33781

Title PRESIDENT
Name JENNINGS, TOM
Address PINELLAS PROFESSIONAL CENTER
7800 66TH STREET N. #205
City-State-Zip: PINELLAS PARK FL 33781

Title TREASURER
Name HUTCHISON, DOODIE
Address 28870 US HIGHWAY 19 NORTH
SUITE 327
City-State-Zip: CLEARWATER FL 33761

Title SECRETARY
Name PALMATEER, PAT
Address PINELLAS PROFESSIONAL CENTER
7800 66TH STREET N. #205
City-State-Zip: PINELLAS PARK FL 33781

Title DIRECTOR
Name BARNAS, LINDA
Address 28870 US HIGHWAY 19 NORTH
SUITE 327
City-State-Zip: CLEARWATER FL 33761

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: TOM JENNINGS

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04/24/2021

Electronic Signature of Signing Officer/Director Detail

Date