

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007477

Entity Name: CAROLINA LANDINGS AT UNIVERSITY PLACE CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 14, 2024
Secretary of State
0727569993CC**Current Principal Place of Business:**C/O REALMANAGE
458 N TAMIAMI TRAIL
OSPREY, FL 34229**Current Mailing Address:**C/O REALMANAGE
PO BOX 803555
DALLAS, TX 75380 US**FEI Number: 20-0326974****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WELLS OLAH, P.A.
3277 FRUITVILLE ROAD
BUILDING B
SARASOTA, FL 34237 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:** WELLS OLAH**03/14/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	VREELAND, LINDA
Address	C/O REALMANAGE 458 N TAMIAMI TRAIL
City-State-Zip:	OSPREY FL 34229

Title	TREASURER
Name	MCKILLIP, VALOREE
Address	C/O REALMANAGE 458 N TAMIAMI TRAIL
City-State-Zip:	OSPREY FL 34229

Title	VP
Name	EDWARDS, MELISSA
Address	C/O REALMANAGE 458 N TAMIAMI TRAIL
City-State-Zip:	OSPREY FL 34229

Title	SECRETARY
Name	PATEL, FEVIL
Address	C/O REALMANAGE 458 N TAMIAMI TRAIL
City-State-Zip:	OSPREY FL 34229

Title	DIRECTOR
Name	ZEZIMA, MICHAEL
Address	C/O REALMANAGE 458 N TAMIAMI TRAIL
City-State-Zip:	OSPREY FL 34229

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: LINDA VREELAND**PRESIDENT****03/14/2024**

Electronic Signature of Signing Officer/Director Detail

Date