2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2025
Secretary of State
1628135646CC

DOCUMENT# N03000007477

Entity Name: CAROLINA LANDINGS AT UNIVERSITY PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O COMMUNIQUE
5824 BEE RIDGE RD PMB 413
SARASOTA, FL 34233

Current Mailing Address:

C/O COMMUNIQUE
5824 BEE RIDGE ROAD PMB 413
SARASOTA, FL 34233 US

FEI Number: 20-0326974

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNIQUE
C/O COMMUNIQUE
5824 BEE RIDGE ROAD PMB 413
SARASOTA, FL 34233 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: MAUREEN SCHOENING 04/11/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	TREASURER
Name	ZEZIMA, MIKE	Name	MCKILLIP, VALOREE
Address	C/O COMMUNIQUE 5824 BEE RIDGE ROAD PMB 413	Address	C/O COMMUNIQUE 5824 BEE RIDGE ROAD, PMB 413
City-State-Zip:	SARASOTA FL 34233	City-State-Zip:	SARASOTA FL 34233
Title	SECRETARY	Title	DIRECTOR
Name	WATSON, ERIN	Name	SPERA, ADAM
Address	C/O COMMUNIQUE 5824 BEE RIDGE ROAD PMB 413	Address	C/O COMMUNIQUE 5824 BEE RIDGE ROAD PMB 413
City-State-Zip:	SARASOTA FL 34233	City-State-Zip:	SARASOTA FL 34233
Title	MANAGER		
Name	SCHOENING, MAUREEN		
Address	C/O COMMUNIQUE 5824 BEE RIDGE ROAD PMB 413		
City-State-Zip:	SARASOTA FL 34233		

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: MAUREEN SCHOENING MANAGER 04/11/2025

Electronic Signature of Signing Officer/Director Detail — Date