

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007477

Entity Name: CAROLINA LANDINGS AT UNIVERSITY PLACE CONDOMINIUM ASSOCIATION, INC.**FILED**
Feb 10, 2014
Secretary of State
CC3229986240**Current Principal Place of Business:**C/O ARGUS PROPERTY MGMT
2477 STICKNEY POINT ROAD, SUITE #118A
SARASOTA, FL 34231**Current Mailing Address:**C/O ARGUS PROPERTY MGMT
2477 STICKNEY POINT ROAD, SUITE #118A
SARASOTA, FL 34231 US**FEI Number: 20-0326974****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ARGUS PROPERTY MANAGEMENT
2477 STICKNEY POINT ROAD
SUITE #118A
SARASOTA, FL 34231 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name THOMPSON, JEWELETTE
Address C/O ARGUS PROPERTY MGMT
2477 STICKNEY POINT ROAD, SUITE
#118A
City-State-Zip: SARASOTA FL 34231

Title SECRETARY, TREASURER
Name RAY, HEATHER
Address 7538 PLANTATION CIRCLE
City-State-Zip: UNIVERSITY PARK FL 34201

Title AS
Name HAMMERLING, WALTER E
Address 2477 STICKNEY POINT RD STE 118A
City-State-Zip: SARASOTA FL 34231

Title P
Name FAULKNER, KENNETH
Address 7739 PLANTATION CIRCLE
City-State-Zip: UNIVERSITY PARK FL 34201

Title VP
Name WALLACH, JAMES
Address PO BOX 49557
City-State-Zip: SARASOTA FL 34230

Title D
Name COSGROVE, KELLY P
Address 7784 PLANTATION CIRCLE
City-State-Zip: UNIVERSITY PARK FL 34201

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: KENNETH FAULKNER**PRESIDENT****02/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date