## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400005314

Entity Name: MARISOL OWNERS ASSOCIATION, INC.

**FILED** Jan 29, 2015 **Secretary of State** CC8111750907

# **Current Principal Place of Business:**

10719 FRONT BEACH RD PANAMA CITY BEACH. FL 32407

## **Current Mailing Address:**

4608 OPA LOCKA LANE SUITE 300 DESTIN, FL 32541 US

FEI Number: 20-1249767 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

SOUTHERN ASSOCIATION MANAGEMENT 4608 OPA LOCKA LANE SUITE 300 DESTIN, FL 32541 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: JIMMIE MCCREADY 01/29/2015

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title ٧P Title **PRESIDENT** 

MCCREADY, JIMMIE KRASZEWSKY, WALTER Name Name

Address 4608 OPA LOCKA LANE Address 4608 OPA LOCKA LANE

SUITE 300 SUITE 300

DESTIN FL 32541 DESTIN FL 32541 City-State-Zip:

City-State-Zip:

Title **TREASURER** Title **SECRETARY** 

DI PIETRO, JOSEPH Name Name JOHNSON, BRIAN

4608 OPA LOCKA LANE 4608 OPA LOCKA LANE Address Address

SUITE 300 SUITE 300

DESTIN FL 32541 DESTIN FL 32541 City-State-Zip: City-State-Zip: Title

DIRECTOR ANSON, NANCY Name

Address 4608 OPA LOCKA LANE

SUITE 300

DESTIN FL 32541 City-State-Zip:

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.

Electronic Signature of Signing Officer/Director Detail