## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006513

Entity Name: CULBREATH KEY BAYSIDE CONDOMINIUM ASSOCIATION,

INC.

Mar 25, 2019 **Secretary of State** 2679041121CC

**FILED** 

## **Current Principal Place of Business:**

C/O WISE PROPERTY MANAGEMENT, INC. 18550 N DALE MABRY HIGHWAY LUTZ, FL 33548

## **Current Mailing Address:**

18550 N DALE MABRY HIGHWAY LUTZ, FL 33548 US

FEI Number: 20-1413793 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

GLAUSIER, CHARLES EVANS ESQ. 400 N. ASHLEY DRIVE - STE. 2020 TAMPA, FL 33602 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: CHARLES EVANS GLAUSIER, ESQ. 03/25/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

Name DAVIS, DEREK A. Name PAGE, RON

5000 CULBREATH KEY WAY 5000 CULBREATH KEY WAY Address Address

City-State-Zip: **TAMPA FL 33611** City-State-Zip: **TAMPA FL 33611** 

Title **TREASURER** Title **DIRECTOR** Name WILLETT, MARK Name BELEJCHAK, ADINA

Address 5000 CULBREATH KEY WAY Address 5000 CULBREATH KEY WAY

City-State-Zip: **TAMPA FL 33611** City-State-Zip: **TAMPA FL 33611** 

Title **SECRETARY** Name MABE, JUSTIN

Address 5000 CULBREATH KEY WAY

City-State-Zip: **TAMPA FL 33611** 

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: DEREK DAVIS **PRESIDENT** 03/25/2019