### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011208

Entity Name: TREETOP RESIDENTIAL OWNERS ASSOCIATION, INC.

FILED Apr 11, 2017 Secretary of State CC1887907544

# **Current Principal Place of Business:**

7 TOWN CTR LOOP STE C16 SANTA ROSA BEACH. FL 32459

## **Current Mailing Address:**

POB 1247

SANTA ROSA BEACH, FL 32459

FEI Number: 20-2709803 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

STENBERG, CYNTHIA T 7 TOWN CENTER LOOP SUITE C16 SANTA ROSA BEACH, FL 32459 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: CYNTHIA T. STENBERG

04/11/2017

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title STD Title PD

Name ANSON, NANCY Name WOOLLEY, PETER

Address 508 N. AUDUBON DRIVE Address POST OFFICE BOX 611718

City-State-Zip: ALBANY GA 31707 City-State-Zip: ROSEMARY BEACH FL 32461

Title VD Title DIRECTOR

Name BALDOCK, RHONDA Name JOHNSON, KRIS

Address 2621 MITCHAM DRIVE, SUITE 101 Address 321 OAK MOUNTAIN CREST WAY

City-State-Zip: TALLAHASSEE FL 32308 City-State-Zip: PELHAM AL 35124

Title DIRECTOR

Name DANIEL, STEVEN

Address 23103 PORTOBELLO ROAD

City-State-Zip: BIRMINGHAM AL 35242

SIGNATURE: PETER WOOLLEY

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

**PRESIDENT** 

04/11/2017