2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2022
Secretary of State
1952187394CC

DOCUMENT# N04000011661

Entity Name: EMBASSY PARK TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702 US

FEI Number: 20-2250854

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC.
C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702 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: MELINDA MCCLAIN 04/21/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	WILLMENT, ROBERT	Name	HARRIS, HEATHER
Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104	Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	TREASURER	Title	SECRETARY
Name	CLARK, SALLIE	Name	MCCLAIN, MELINDA
Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104	Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	DIRECTOR	Title	DIRECTOR
Name	JOHNSON, KRISTINE	Name	EMBERG, BOBBI JO
Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104	Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	DIRECTOR	Title	DIRECTOR
Name	JOHNSON, LINDA	Name	CONNOR, CHRISTINE
Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104	Address	C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702

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: ROBERT WILLMENT PRESIDENT 04/21/2022

Electronic Signature of Signing Officer/Director Detail — Date