2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000001245

Entity Name: VISTABELLA AT RENAISSANCE COMMONS HOMEOWNERS

ASSOCIATION, INC.

Current Principal Place of Business:

C/O CONCIERGE PROPERTY SOLUTIONS 1075 BROKEN SOUND PARKWAY NW SUITE 105

BOCA RATON, FL 33487

Current Mailing Address:

C/O CONCIERGE PROPERTY SOLUTIONS 1075 BROKEN SOUND PARKWAY NW SUITE 105 BOCA RATON, FL 33487 US

FEI Number: 65-1243562 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONCIERGE PROPERTY SOLUTIONS
C/O CONCIERGE PROPERTY SOLUTIONS
1075 BROKEN SOUND PARKWAY NW SUITE 105
BOCA RATON, FL 33487 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: TRICIA SCHMIDT 11/01/2024

Electronic Signature of Registered Agent Date

FILED

Nov 01, 2024

Secretary of State 3353878938CC

Officer/Director Detail:

Title TREASURER Title PRESIDENT

Name SARONEY, ALLISON Name NATAL, DOROTHY

Address C/O CONCIERGE PROPERTY Address C/O CONCIERGE PROPERTY

SOLUTIONS SOLUTIONS

1075 BROKEN SOUND PARKWAY NW
SUITE 105

1075 BROKEN SOUND PARKWAY NW
SUITE 105

TE 105 SUITE 1

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title SECRETARY Title VP

Name FINN, NINA Name JACOBS , MARK

Address C/O CONCIERGE PROPERTY Address C/O CONCIERGE PROPERTY

SOLUTIONS SOLUTIONS

1075 BROKEN SOUND PARKWAY NW 1075 BROKEN SOUND PARKWAY NW

SUITE 105 SUITE 105

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name TAPIA ALBER

Name TAPIA, ALBERTO

Address 1075 BROKEN SOUND PARKWAY NW

SUITE 105

City-State-Zip: BOCA RATON FL 33487

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: DOROTHY NATAL PRESIDENT 11/01/2024