

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007613

Entity Name: REFLECTIONS OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4100 MARRIOTT DRIVE
UNIT 900
PANAMA CITY BEACH, FL 32408**Current Mailing Address:**4100 MARRIOTT DRIVE
UNIT 900
PANAMA CITY BEACH, FL 32408 US**FEI Number:** 20-8924527**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARR, J. CHRISTOPHER ESQ.
833 HARRISON AVENUE
PO BOX 860
PANAMA CITY, FL 32401 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:** J. CHRISTOPHER BARR, ESQ.

03/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title MEMBER AT LARGE
Name STUENKEL, LISA
Address 35 HUNTINGTON RD., SW
City-State-Zip: ROME GA 30165

Title PRESIDENT
Name NORTHWAY, JOHN C.
Address 4100 MARRIOTT DRIVE
709
City-State-Zip: PANAMA CITY BEACH FL 32411

Title VP
Name CONNOR, KEITH D
Address 674 BOSTWICK CT
City-State-Zip: CINCINNATI OH 45244

Title DIRECTOR, SECRETARY,
TREASURER
Name BOPP, ARTHUR F.
Address 4100 MARRIOTT DRIVE
508
City-State-Zip: PANAMA CITY BEACH FL 32411

Title MEMBER AT LARGE
Name OWENS, JAMES
Address 11 RIVER PINE DRIVE
City-State-Zip: ROME GA 30165

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: JOHN NORTHWAY

PRESIDENT

03/25/2019

Electronic Signature of Signing Officer/Director Detail

Date