Electronic Signature of Registered Agent

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.

**Officer/Director Detail :** 

Title

Name

Address

PSTD

CURLEY, DAVID

55 ASPEN DR.

City-State-Zip: BRIDGEWATER MA 02324

SIGNATURE:

# DOCUMENT# N0500009017

Entity Name: THE VILLAS AT TRAMORE CONDOMINIUM ASSOCIATION, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

10195 TRAMORE AVE ENGLEWOOD. FL 34224

#### **Current Mailing Address:**

55 APSEN DR. BRIDGEWATER, MA 02324

## FEI Number: 20-8267082

# Name and Address of Current Registered Agent:

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: JANET W CURLEY

Electronic Signature of Signing Officer/Director Detail

02/09/2021

FILED Feb 09, 2021 Secretary of State 0545032638CC

Date

Certificate of Status Desired: No

Title VD Name CURLEY, JANET CURLEY Address 55 APSPEN DR. City-State-Zip: BRIDGEWATER MA 02324

MEMBER

Date

STURGES, ERNEST WJR 701 JC CENTER COURT, SUITE 3 PORT CHARLOTTE, FL 33954 US