

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05993

Entity Name: THE COMMODORE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4715 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408**Current Mailing Address:**4715 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US**FEI Number:** 59-2502838**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TOWNSEND, JOHN
304 MAGNOLIA AVENUE
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:** JOHN TOWNSEND

03/10/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|--------------------------|
| Title | TREASURER |
| Name | NICHOLS, EMBRY |
| Address | 1608 INDIAN CREEK CIRCLE |
| City-State-Zip: | FRANKLIN TN 37064 |

| | |
|-----------------|-----------------------|
| Title | PRESIDENT |
| Name | TKATCH, DAVID |
| Address | 5591 GLEBE ROAD |
| City-State-Zip: | WESTMORELAND NH 03467 |

| | |
|-----------------|--------------------|
| Title | VP |
| Name | BELL, MIKE |
| Address | 1336 WOODMERE LANE |
| City-State-Zip: | OWENSBORO KY 42303 |

| | |
|-----------------|--------------------|
| Title | SECRETARY |
| Name | PULLEN, JACKIE |
| Address | 14 ASBURY LANE |
| City-State-Zip: | OAK RIDGE TN 37830 |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | PROTSMAN, RON |
| Address | 4715 THOMAS DR. 109 |
| City-State-Zip: | PANAMA CITY BEACH FL 32408 |

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|-----------------|------------------|
| Title | DIRECTOR |
| Name | FELDMAN, JOHN |
| Address | 5900 FALCON WAY |
| City-State-Zip: | GULFORD IN 47022 |

| | |
|-----------------|-----------------------|
| Title | DIRECTOR |
| Name | NELSON, DAVID |
| Address | 6601 AUTUMN GLENN DR |
| City-State-Zip: | WEST CHESTER OH 45069 |

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: ROB BOYD

GENERAL MANAGER

03/10/2025

Electronic Signature of Signing Officer/Director Detail

Date