

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007396

**FILED**  
**Feb 12, 2018**  
**Secretary of State**  
**CC4178368293**

**Entity Name:** CATALINA ISLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2590 S. BUMBY AVE  
ORLANDO, FL 32806

**Current Mailing Address:**

2590 S. BUMBY AVE  
ORLANDO, FL 32806 US

**FEI Number:** 20-8282274

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BATEMAN MANAGEMENT GROUP, LLC  
2590 S. BUMBY AVE  
ORLANDO, FL 32806 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            PARKE, CHARLES  
Address        2590 S. BUMBY AVE  
City-State-Zip: ORLANDO FL 32806

Title            VP, DIRECTOR  
Name            BATEMAN, JOSHUA  
Address        2590 S. BUMBY AVE  
City-State-Zip: ORLANDO FL 32806

Title            SECRETARY, TREASURER,  
                    DIRECTOR  
Name            RODRIGUEZ, DIANA  
Address        2590 S. BUMBY AVE  
City-State-Zip: ORLANDO FL 32806

*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:** JOSHUA BATEMAN

**MANAGER**

**02/12/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date