

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06103

**FILED**  
**Apr 17, 2015**  
**Secretary of State**  
**CC6486973202**

**Entity Name:** STEEPLECHASE TOWNHOMES OWNERS' ASSN., INC.

**Current Principal Place of Business:**

C/O RESOURCE PROPERTY MANAGEMENT  
7300 PARK STREET  
SEMINOLE, FL 33777

**Current Mailing Address:**

C/O RESOURCE PROPERTY MANAGEMENT  
7300 PARK STREET  
SEMINOLE, FL 33777 US

**FEI Number:** 59-2469257

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF, P.A.  
1511 N WESTSHORE BLVD., #1000  
TAMPA, FL 33607 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  
Name            PUGLIESE, JR., RON  
Address        C/O RESOURCE PROPERTY  
                  MANAGEMENT  
                  7300 PARK STREET  
City-State-Zip: SEMINOLE FL 33777

Title            VP  
Name            TURBIDE, JOANNE  
Address        C/O RESOURCE PROPERTY  
                  MANAGEMENT  
                  7300 PARK STREET  
City-State-Zip: SEMINOLE FL 33777

Title            TREA  
Name            SENENSKY, EDIE  
Address        C/O RESOURCE PROPERTY  
                  MANAGEMENT  
                  7300 PARK STREET  
City-State-Zip: SEMINOLE FL 33777

Title            SECRETARY  
Name            BINNIG, BONNIE LOU  
Address        C/O RESOURCE PROPERTY  
                  MANAGEMENT  
                  7300 PARK STREET  
City-State-Zip: SEMINOLE FL 33777

Title            DIRECTOR  
Name            GUILIANO, ED  
Address        C/O RESOURCE PROPERTY  
                  MANAGEMENT  
                  7300 PARK STREET  
City-State-Zip: SEMINOLE FL 33777

*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:** RON PUGLIESE, JR.

**PRESIDENT**

**04/17/2015**

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

\_\_\_\_\_  
Date