

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009944

**Entity Name:** SEASIDE VILLAS AT ISLES OF VENICE HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**7077475167CC**

**Current Principal Place of Business:**

C/O VESTA PROPERTY SERVICES  
2500 HOLLYWOOD BLVD 310  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

C/O VESTA PROPERTY SERVICES  
2500 HOLLYWOOD BLVD STE 310  
HOLLYWOOD, FL 33020 US

**FEI Number: 26-1389692**

**Certificate of Status Desired: No**

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

VESTA PROPERTY SERVICES  
VESTA PROPERTY SERVICES  
2500 HOLLYWOOD BLVD 310  
HOLLYWOOD, FL 33020 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: JILL KOCH**

**04/29/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           MEYER, LAYNE  
Address        2500 HOLLYWOOD BLVD  
                  310  
City-State-Zip: HOLLYWOOD FL 33020

Title           SECRETARY  
Name           WEINSTEIN, GARRETT  
Address        2500 HOLLYWOOD BLVD  
                  310  
City-State-Zip: HOLLYWOOD FL 33020

Title           PRESIDENT  
Name           DAVIS, MICHAEL  
Address        C/O JK PROPERTY MANAGEMENT,  
                  LLC  
                  2500 HOLLYWOOD BLVD 310  
City-State-Zip: HOLLYWOOD FL 33020

Title           VP  
Name           HADDAD, MARK  
Address        C/O JK PROPERTY MANAGEMENT,  
                  LLC  
                  2500 HOLLYWOOD BLVD 310  
City-State-Zip: HOLLYWOOD FL 33020

Title           DIRECTOR  
Name           TELLO, STEPHEN  
Address        2500 HOLLYWOOD BLVD  
                  310  
City-State-Zip: HOLLYWOOD FL 33020

*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: MICHAEL DAVIS**

**PRESIDENT**

**04/29/2021**

Electronic Signature of Signing Officer/Director Detail

Date