## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07783

Entity Name: ALAMEDA ISLES HOMEOWNERS ASSOCIATION, INC.

**FILED** Mar 04, 2024 **Secretary of State** 5026701618CC

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

1 ALAMEDA GRANDE ENGLEWOOD, FL 34223

## **Current Mailing Address:**

1 ALAMEDA GRANDE

ENGLEWOOD, FL 34223 US

FEI Number: 59-2294634 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FENNESSEY, TOM 1 ALAMEDA GRANDE ENGLEWOOD, FL 34223 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: TOM FENNESSEY 03/04/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRES** Title

FENNESSEY, TOM Name GRAHAM, MELINDA Name 1 ALAMEDA GRANDE Address 1 ALAMEDA GRANDE Address City-State-Zip: ENGLEWOOD FL 34223 ENGLEWOOD FL 34223 City-State-Zip:

Title SEC Title **TRES** 

Name HAASER, JAMES Name PALMER, DANA Address 1 ALAMEDA GRANDE Address 1 ALAMEDA GRANDE ENGLEWOOD FL 34223 City-State-Zip: City-State-Zip: ENGLEWOOD FL 34223

Title DIR Title DIR

Name BOUCHARD, CLIFFORD Name GILBERT, BLAIR Address 1 ALAMEDA GRANDE 1 ALAMEDA GRANDE Address City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: ENGLEWOOD FL 34223

Title DIR

BLAISER, DAWN Name

Address 1 ALAMEDA GRANDE ENGLEWOOD FL 34223 City-State-Zip:

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: FENNESSEY, TOM 03/04/2024 **PRESIDENT**