

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08904

Entity Name: ALL SEASONS VACATION RESORT CONDOMINIUM
ASSOCIATION, INC.**Current Principal Place of Business:**13070 GULF BLVD
MADEIRA BCH, FL 33708**Current Mailing Address:**13070 GULF BLVD
MADEIRA BCH, FL 33708**FEI Number: 59-2783174****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VACATIA LIBERTE MANAGEMENT LLC
118 107TH AVE
TREASURE ISLAND,, FL 33706 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: SMITH TOUSSAINT****04/13/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	BLEVINS, DANIEL	Name	GLEATON, WILLIAM
Address	10917 SW 83RD AVE.	Address	3921 LAKE JOYCE DR.
City-State-Zip:	OCALA FL 34481	City-State-Zip:	LAND O LAKES FL 34639
Title	T	Title	D
Name	JONES, DENISE	Name	BYRNE, WILLIAM
Address	2205 TONIWOOD LN	Address	5821 DORY WAY
City-State-Zip:	PALM HARBOR FL 34685	City-State-Zip:	TAMPA FL 33615
Title	S		
Name	LAFORD, RICHARD		
Address	17105 GULF BLVD. #425		
City-State-Zip:	N. REDINGTON BCH. FL 33708		

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: DANIEL BLEVINS**PRESIDENT****04/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date