## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010943

**Entity Name: ALEXANDER WOODS TOWNHOMES HOMEOWNERS** 

ASSOCIATION, INC.

**Current Principal Place of Business:** 

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

**Current Mailing Address:** 

235 APOLLO BEACH BLVD

#417

Title

City-State-Zip:

APOLLO BEACH, FL 33572 US

FEI Number: 30-0761321 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT, LLC 212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 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: CHRISTINE M TRIMMER 02/21/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

VΡ

Title PRESIDENT Title TREASURER

Name SIMMONS, JOHN Name FEATHERSTON, MARK

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

235 APOLLO BEACH BLVD #417

Title

LICENSED COMMUNITY

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Name WIGERMAN, PAUL ASSOCIATION MANAGER

Name TRIMMER, CHRISTINE M
Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC Address C/O COMMUNITIES FIRST

235 APOLLO BEACH BLVD #417 ASSOCIATION MANAGEMENT LLC 235 APOLLO BEACH BLVD #417

APOLLO BEACH FL 33572

City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY

Name CARRIER, JANINE Title DIRECTOR

Name PIPPENGER, KELLY

s 235 APOLLO BEACH BLVD #417 Address 235 APOLLO BEACH BLVD

#417

City-State-Zip: APOLLO BEACH FL 33572

City-State-Zip: APOLLO BEACH FL 33572

Only Glate Zip. At GEED BEACH 1 E 3307

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: CHRISTINE TRIMMER

LICENSED COMMUNITY 02/21/2023
ASSOCIATION MANAGER

FILED Feb 21, 2023

Secretary of State

6479647314CC