

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

DOCUMENT# N14000007088

**Entity Name:** INDEPENDENCE TOWNHOMES IV COMMUNITY ASSOCIATION, INC.

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC7752669860**

**Current Principal Place of Business:**

8390 CHAMPIONS GATE BLVD.  
STE 110  
CHAMPIONSGATE, FL 33896

**Current Mailing Address:**

8390 CHAMPIONS GATE BLVD.  
STE 110  
CHAMPIONSGATE, FL 33896 US

**FEI Number: 47-1852025**

**Certificate of Status Desired: Yes**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DP  
Name DE LA OSSA, CARLOS  
Address 8390 CHAMPIONSGATE BOULEVARD,  
SUITE 110  
City-State-Zip: CHAMPIONSGATE FL 33896

Title DV  
Name ANDRADE, MILTON  
Address 8390 CHAMPIONSGATE BOULEVARD,  
SUITE 110  
City-State-Zip: CHAMPIONSGATE FL 33896

Title DST  
Name PACE, ERICKA  
Address 8390 CHAMPIONSGATE BOULEVARD,  
SUITE 110  
City-State-Zip: CHAMPIONSGATE FL 33896

*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: CARLOS DE LA OSSA**

**PRESIDENT**

**01/12/2015**

Electronic Signature of Signing Officer/Director Detail

Date