2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000012150

Entity Name: CRESCENT CENTRAL STATION CONDOMINIUM

ASSOCIATION, INC.

Current Principal Place of Business:

480 N ORANGE AVE ORLANDO, FL 32801

Current Mailing Address:

10 STATE HOUSE SQUARE 15TH FLOOR HARTFORD, CT 06103-3604

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

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

FILED Feb 07, 2020

Secretary of State

7528749370CC

Officer/Director Detail:

Title DΡ Title DVP

Name CURTIN, MARCIA N Name COOMBES, JONATHAN

Address 10 STATE HOUSE SQUARE, 15TH 10 STATE HOUSE SQUARE, 15TH Address

FLOOR FLOOR

City-State-Zip: HARTFORD CT 06103-3604 City-State-Zip: HARTFORD CT 06103-3604

Title S Title Т

MENDEZ, CONNIE BRICE, MICHELE Name Name

Address 480 N ORANGE AVE Address 100 COLONIAL CENTER PKWY STE

CURRAN, JAY

City-State-Zip: ORLANDO FL 32801 LAKE MARY FL 32746 City-State-Zip:

Title D

Title REICHER, MARC Name

Address CHAMPIONGATE BLVD STE 104

3340 PEACTREE ROAD NE STE 1560 Address City-State-Zip: CHAMPIONSGATE FL 33896

City-State-Zip: ATLANTA GA 30362

Name

Title DVP

Title S Name BERARDINELLI, JIM Name

MILLER, DAVID 3340 PEACTREE ROAD NE STE 1560 Address

3340 PEACTREE ROAD NE STE 1560 Address City-State-Zip: ATLANTA GA 30362

City-State-Zip: ATLANTA GA 30362

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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.

02/07/2020 SIGNATURE: CONNIE MENDEZ **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title T Title D

Name PIERCE, DARREN Name REICHER, MARC

Address 3340 PEACTREE ROAD NE STE 1560 Address 8390 CHAMPIONGATE BLVD STE 1560

City-State-Zip: ATLANTA GA 30362

City-State-Zip: ATLANTA GA 30326