#### 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000001516

Entity Name: TRASONA WEST NEIGHBORHOOD ASSOCIATION, INC.

FILED
Apr 14, 2025
Secretary of State
0023868990CC

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

1331 BEDFORD DRIVE SUITE 103

MELBOURNE, FL 32940

# **Current Mailing Address:**

1331 BEDFORD DRIVE SUITE 103

MELBOURNE, FL 32940 US

FEI Number: 81-3454387 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DILLON, THOMAS B 1331 BEDFORD DRIVE SUITE 103 MELBOURNE, FL 32940 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: THOMAS B. DILLON 04/14/2025

Electronic Signature of Registered Agent Date

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#### Officer/Director Detail:

Title PRESIDENT Title VP

Name VEIT, THEODORE Name FONTINEL, AARON

Address 1331 BEDFORD DRIVE Address 1331 BEDFORD DRIVE

SUITE 103 SUITE 103

City-State-Zip: MELBOURNE FL 32940 City-State-Zip: MELBOURNE FL 32940

Title TREASURER Title DIRECTOR

Name SANCHEZ, JOSEPH Name LEWIS, KATHLEEN

Address 1331 BEDFORD DRIVE Address 1331 BEDFORD DRIVE

SUITE 103 SUITE 103

City-State-Zip: MELBOURNE FL 32940 City-State-Zip: MELBOURNE FL 32940

Title SECRETARY Title MANAGER

Name ARTZE, CESAR Name DILLON, THOMAS D.

Address 1331 BEDFORD DRIVE Address 1331 BEDFORD DRIVE

SUITE 103

City-State-Zip: MELBOURNE FL 32940 City-State-Zip: MELBOURNE FL 32940

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: THOMAS DILLON MANAGER 04/14/2025