

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000006060

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**025555537CC**

**Entity Name:** CENTRAL PARK TOWNHOMES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

511 S. WESTLAND AVE.  
#16  
TAMPA, FL 33606

**Current Mailing Address:**

511 S. WESTLAND AVE.  
#16  
TAMPA, FL 33606 US

**FEI Number: 82-4169607**

**Certificate of Status Desired: No**

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

VERSAGGI, RUSSELL  
511 S. WESTLAND AVE.  
#16  
TAMPA, FL 33606 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 D  
Name VERSAGGI, RUSSELL  
Address 511 S. WESTLAND AVE., #16  
City-State-Zip: TAMPA FL 33606

Title D  
Name WILSON-VERSAGGI, FRANCES L  
Address 511 S. WESTLAND AVE., #16  
City-State-Zip: TAMPA FL 33606

Title D  
Name KOGUT, ANDREW  
Address 2333 FEATHER SOUND DR.  
City-State-Zip: CLEARWATER FL 33762

*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: RUSSELL VERSAGGI**

**PRES**

**04/05/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date