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: SUE HARKER	SECRETARY	03/28/2022

DOCUMENT# N18000006768

Entity Name: SOUTH BRANCH TOWN CENTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O DEAKIN PROPERTY SERVICES 2905 BAYSHORE BLVD SUITE 200 TAMPA, FL 33629

Current Mailing Address:

C/O DEAKIN PROPERTY SERVICES 2905 BAYSHORE BLVD SUITE 200 TAMPA, FL 33629 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DEAKIN, GEORGE 2905 BAYSHORE BLVD. SUITE 200 TAMPA FL 33629 US

Certificate of Status Desired: No

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.

Officer/Director Detail :				
Title	DIRECTOR, PRESIDENT	Title	DIRECTOR, SECRETARY,	
Name	SHALLOW, JIM	TREASURER Name HARKER, SUE		
Address	2200 TOUCHPOINT DR			
City-State-Zip: ODESSA FL 33556	Address	5858 CENTRAL AVE		
	City-State-Zip:	ST PETERSBURG FL 33707		
Title	DIRECTOR			
Name	MORGAN, TAYLOR			
Address	3344 PEACHTREE ROAD NE STE 1100			
City-State-Zip:	ATLANTA GA 30326			

Electronic Signature of Signing Officer/Director Detail

FILED Mar 28, 2022 Secretary of State 6393241354CC

Date

03/28/2022 Date