

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000005030

Entity Name: 4TH STREET PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**386 PINE TREE RD.
LAKE MARY, FL 32746**Current Mailing Address:**386 PINE TREE ROAD
LAKE MARY, FL 32746 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARFIELD, WILLIAM E ESQ.
225 S. WESTMONTE DRIVE
SUITE 2040
ALTAMONTE SPRINGS, FL 32714 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 DIRECTOR,PRESIDENT

Name SHAW, TERRY

Address 386 PINE TREE RD.

City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR,VICE PRESIDENT

Name TSESMELIS, JOHN

Address 153 PARLIAMANT LOOP SUITE 1001

City-State-Zip: ALTAMONTE SPRINGS FL 32746

Title DIRECTOR

Name BARFIELD, WILLIAM E

Address 225 S. WESTMONTE DRIVE, SUITE
2040

City-State-Zip: ALTAMONTE SPRINGS, FL 32714

Title SECRETARY,TREASURER

Name SHAW, LINDA

Address 153 PARLIAMENT LOOP
SUITE 1001

City-State-Zip: LAKE MARY FL 32746

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: LINDA K SHAW**SECRETARY****01/24/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date