

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N19000005139

**Entity Name:** 505 ON FIFTH RESIDENTIAL CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Nov 10, 2022**  
**Secretary of State**  
**4774524630CC**

**Current Principal Place of Business:**

COMMUNITY MANAGEMENT ASSOCIATES, INC.  
7 TOWN CENTER LOOP SUITE C-16  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

COMMUNITY MANAGEMENT ASSOCIATES INC.  
1465 NORTHSIDE DR. N.W. 128  
ATLANTA, GA 30318 US

**FEI Number:** 84-1888268

**Certificate of Status Desired:** Yes

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

COMMUNITY MANAGEMENT ASSOCIATES INC.  
COMMUNITY MANAGEMENT ASSOCIATES, INC.  
7 TOWN CENTER LOOP SUITE C-16  
SANTA ROSA BEACH, FL 32459 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:** ERIC J. HENNING

11/10/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FINNEGAN, KENNETH  
Address        COMMUNITY MANAGEMENT ASSOCIATES INC.  
                  1465 NORTHSIDE DR. N.W. 128  
City-State-Zip: ATLANTA GA 30318

Title            VP, SECRETARY  
Name            SONG, GE  
Address        COMMUNITY MANAGEMENT ASSOCIATES INC.  
                  1465 NORTHSIDE DR. N.W. 128  
City-State-Zip: ATLANTA GA 30318

Title            DIRECTOR  
Name            HOSKINS, ALAN  
Address        COMMUNITY MANAGEMENT ASSOCIATES INC.  
                  1465 NORTHSIDE DR. N.W. 128  
City-State-Zip: ATLANTA GA 30318

Title            AGENT  
Name            HENNING, ERIC J.  
Address        COMMUNITY MANAGEMENT ASSOCIATES INC.  
                  1465 NORTHSIDE DR. N.W. 128  
City-State-Zip: ATLANTA GA 30318

*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:** ERIC J. HENNING

AGENT

11/10/2022

