

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

DOCUMENT# N21000000087

**Entity Name:** COLLEGE TOWN PHASE 2-MU CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 12, 2022**  
**Secretary of State**  
**1493656282CC**

**Current Principal Place of Business:**

UNIVERSITY CENTER, STE C-5100  
TALLAHASSEE, FL 32392-8058

**Current Mailing Address:**

UNIVERSITY CENTER, STE C-5100  
TALLAHASSEE, FL 32392-8058 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SINCLAIR, JOHN P  
UNIVERSITY CENTER, STE C-5100  
TALLAHASSEE, FL 32392-8058 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	Title	D
Name	ALFORD, MICHAEL	Name	SINCLAIR III, JOHN P
Address	UNIVERSITY CENTER, STE C-5100	Address	UNIVERSITY CENTER, STE C-5100
City-State-Zip:	TALLAHASSEE FL 32392-8058	City-State-Zip:	TALLAHASSEE FL 32392-8058

*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: JOHN P. SINCLAIR III**

**DIRECTOR**

**04/12/2022**

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

\_\_\_\_\_  
Date