

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000004146

**FILED**  
**Apr 09, 2021**  
**Secretary of State**  
**9285291128CC****Entity Name:** PARKSIDE AT MARTIN DOWNS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4425 SW MARTIN HWY  
PALM CITY, FL 34990**Current Mailing Address:**P.O. BOX 2303  
PALM CITY, FL 34991 US**FEI Number:** 65-0528251**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARKSIDE AT MARTIN DOWNS HOA INC  
APEX TAX GROUP LLC  
4425 SW MARTIN HWY  
PALM CITY, FL 34990 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	TREASURER
Name	RICHETELLI, GEORGE
Address	2493 SW PARKSIDE DRIVE
City-State-Zip:	PALM CITY FL 34990

Title	DIRECTOR
Name	ASHTON, TRICIA
Address	1634 SW PINELAND WAY
City-State-Zip:	PALM CITY FL 34990

Title	PRESIDENT
Name	LANDRIGAN, ROBERT
Address	2454 SW PARKSIDE DR.
City-State-Zip:	PALM CITY FL 34990

Title	DIRECTOR
Name	PEDATELLA, JOHN
Address	2481 SW NETTLES CT.
City-State-Zip:	PALM CITY FL 34990

Title	SECRETARY
Name	KAMINSKI, JOSEPHINE
Address	2433 SW PARKSIDE DR.
City-State-Zip:	PALM CITY FL 34990

*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: GEORGE RICHETELLI****TREASURER****04/09/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date