

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004295

Entity Name: AYLESFORD HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**FRANKLY COASTAL PROPERTY MGMT, LLC
P.O. BOX 1294
TARPON SPRINGS, FL 34688**Current Mailing Address:**FRANKLY COASTAL PROPERTY MGMT, LLC
P.O. BOX 1294
TARPON SPRINGS, FL 34688 US**FEI Number:** 59-3275976**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CIANFRONE, JOSEPH
1964 BAYSHORE BLVD
A
DUNEDIN, FL 34698 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:** JOSEPH CIANFRONE

01/14/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	DENHAM, TOM
Address	FRANKLY COASTAL PROPERTY MGMT, LLC P.O. BOX 1294
City-State-Zip:	TARPON SPRINGS FL 34688
Title	DIRECTOR
Name	DESAI, JIGISH
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DRIVE N STE. 100
City-State-Zip:	SAINT PETERSBURG FL 33716
Title	SECRETARY, TREASURER
Name	SUELLAU, LORI
Address	FRANKLY COASTAL PROPERTY MGMT, LLC P.O. BOX 1294
City-State-Zip:	TARPON SPRINGS FL 34688

Title	DIRECTOR
Name	FITZGERALD, GEORGE
Address	FRANKLY COASTAL PROPERTY MGMT, LLC P.O. BOX 1294
City-State-Zip:	TARPON SPRINGS FL 34688
Title	DIRECTOR
Name	O'NEIL, COLIN
Address	FRANKLY COASTAL PROPERTY MGMT, LLC P.O. BOX 1294
City-State-Zip:	TARPON SPRINGS FL 34688

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: TOM DENHAM

PRESIDENT

01/14/2020

Electronic Signature of Signing Officer/Director Detail

Date