

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004295

Entity Name: AYLESFORD HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE N STE. 100
SAINT PETERSBURG, FL 33716**Current Mailing Address:**FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE N STE. 100
SAINT PETERSBURG, FL 33716 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

01/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DENHAM, TOM
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name DESAI, JIGISH
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name TIANO, EILEEN
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title VP
Name SUELLAU, LORI
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title SECRETARY
Name LOUISE, KELLY
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name O'NEIL, COLIN
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title TREASURER
Name O MALIA, CHRISTA
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE N STE. 100
City-State-Zip: SAINT PETERSBURG FL 33716

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

01/09/2018

Electronic Signature of Signing Officer/Director Detail

Date