## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002369

Entity Name: FIESTA HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 28, 2018
Secretary of State
CC6529346795

## **Current Principal Place of Business:**

C/O MLM PROPERTY MANAGEMENT 9900 W. SAMPLE ROAD SUITE 300 CORAL SPRINGS, FL 33065

## **Current Mailing Address:**

C/O MLM PROPERTY MANAGEMENT 9900 W. SAMPLE ROAD SUITE 300 CORAL SPRINGS, FL 33065 US

FEI Number: 65-0586974 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BAKALAR & ASSOCIATES 12470 WEST ATLANTIC BLVD POMPANO BEACH, FL 33071 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: MICHAEL BAKALAR 04/28/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title VPD

Name PRESS-VIDAL, LORI Name CLETER, LISA

Address 9900 W. SAMPLE ROAD SUITE 300 Address 9900 W. SAMPLE ROAD SUITE 300

City-State-Zip: CORAL SPRINGS, FL 33065 City-State-Zip: CORAL SPRINGS, FL 33065

Title TD/S Title D

Name CUDAK, EVA Name CLARKE, CLAUDE

Address 9900 W.SAMPLE ROAD SUITE 300 Address 9900 W. SAMPLE ROAD SUITE 300

City-State-Zip: CORAL SPRINGS, FL 33065 City-State-Zip: CORAL SPRINGS, FL 33065

Title DIRECTOR
Name CULLIN, PAT

Address C/O MLM PROPERTY MANAGEMENT

9900 W. SAMPLE ROAD SUITE 300

City-State-Zip: CORAL SPRINGS FL 33065

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: LORI PRESS-VIDAL

**PRESIDENT** 

04/28/2018