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.

TREASURER

SIGNATURE: G MICHAEL SWOR

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent Officer/Director Detail ·

Officer/Director Detail :				
Title	PRESIDENT	Title	VP	
Name	SWOR, JACODY	Name	ZOLTAN TOTH	
Address	842 MANGROVE POINT RD	Address	323 BEACH ROAD	
City-State-Zip:	SARASOTA FL 34242	City-State-Zip:	SARASOTA FL 34242	
Title	VP	Title	VP	
Name	ANNA BARTA	Name	SWOR, MICHAEL DR.	
Address	325 BEACH ROAD	Address	842 MANGROVE POINT RD	
City-State-Zip:	SARASOTA FL 34242	City-State-Zip:	SARASOTA FL 34242	
Title	SECRETARY	Title	TREASURER	
Name	MCCARTY, KIMBERLY	Name	SWOR, MICHAEL	
Address	319 BEACH ROAD	Address	842 MANGROVE POINT RD	
City-State-Zip:	SARASOTA FL 34242	City-State-Zip:	SARASOTA FL 34242	

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: JACODY SWOR

**Current Mailing Address:** 

842 MANGROVE POINT RD SARASOTA, FL 34242

DOCUMENT# 760333

842 MANGROVE POINT RD SARASOTA. FL 34242 US

**Current Principal Place of Business:** 

## FEI Number: 59-2244863

# Name and Address of Current Registered Agent:

SWOR, JACODY 842 MANGROVE POINT RD SARASOTA, FL 34242 US

## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ALPINO BIANCO VILLAS ASSOCIATION, INC.

### FILED Apr 03, 2019 Secretary of State 5252300119CC

04/03/2019 Date

Certificate of Status Desired: No

04/03/2019

Date