

**L'ELEGANCE CONDOMINIUM ASSOCIATION, INC.**

January 1, 2019

**REQUIRED INFORMATION FORM**

(This Information Is for Association Use Only)

THE CONDOMINIUM ASSOCIATION IS REQUIRED TO UPDATE THEIR RECORDS EACH YEAR

**PLEASE** FILL OUT THE FORM BELOW AND RETURN TO:  
L'ELEGANCE, 1800 BEN FRANKLIN DRIVE, SARASOTA, FL 34236

UNIT#: \_\_\_\_\_ OWNER: \_\_\_\_\_ TEL #: \_\_\_\_\_

SPOUSE: \_\_\_\_\_ VOTING REP: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ TEL # \_\_\_\_\_

(If other than Ben Franklin Dr.)

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ TEL # \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_

CELL PH#: \_\_\_\_\_

PERSONS AUTHORIZED TO HAVE ONGOING ACCESS TO YOUR UNIT: \_\_\_\_\_

DOES ANY PERSON USING YOUR UNIT HAVE SPECIAL NEEDS: \_\_\_\_\_

IN CASE OF EMERGENCY (OTHER THAN OWNER):

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

I/We consent to receive notice of Association meetings by electronic transmission. This can be revoked at any time.

I/We do not have e-mail \_\_\_\_\_

OWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_