

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707980

Entity Name: INTRACOASTAL HOUSE CONDOMINIUM ASSOCIATION, INC.

FILED
May 11, 2020
Secretary of State
6037130392CC

Current Principal Place of Business:

629 SE 19TH AVE.
DEERFIELD BEACH, FL 33441

Current Mailing Address:

629 SE 19TH AVE.
DEERFIELD BEACH, FL 33441

FEI Number: 59-6167827

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INTRACOASTAL HOUSE CONDOMINIUM ASSOCIATION, INC.
629 SE 19 AVE
DEERFIELD BEACH, FL 33441 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: INTRACOASTAL HOUSE CONDOMINIUM ASSOCIATION

05/11/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BERGE, NJAAL
Address 629 SE 19 AVE
City-State-Zip: DEERFIELD BEACH FL 33441

Title TREASURER
Name LEE, JANET` M
Address 629 SE 19 AVE
City-State-Zip: DEERFIELD BEACH FL 33441

Title VP
Name RAMPELLI, DIANE
Address 629 SE 19 AVE
City-State-Zip: DEERFIELD BEACH FL 33441

Title SECRETARY
Name RAMPELLI, DIANE
Address 629 SE 19 AVE
City-State-Zip: DEERFIELD BEACH FL 33441

Title DIRECTOR
Name MONTGOMERY, GWEN
Address 629 SE 19TH AVE
City-State-Zip: DEERFIELD BEACH FL 33441

Title DIRECTOR
Name WOLFE, ERIC
Address 629 SE 19 AVENUE
City-State-Zip: DEERFIELD BEACH FL 33441

Title DIRECTOR
Name PALERMO, LOUIS
Address 629 SE 19 AVE
City-State-Zip: DEERFIELD BEACH FL 33441

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: NJAAL BERGE

PRESIDENT

05/11/2020

Electronic Signature of Signing Officer/Director Detail

Date