

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707980

**FILED**  
**Feb 22, 2016**  
**Secretary of State**  
**CC5945955928**

**Entity Name:** INTRACOASTAL HOUSE CONDOMINIUM ASSOCIATION, INC.

**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:**

MIRZA BASULTO & ROBBINS, LLP  
14160 NW 77 COURT  
SUITE 22  
MIAMI LAKES, FL 33016 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

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

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

Title SECRETARY  
Name MYERS, CHERYL  
Address 629 SE 19TH AVE  
City-State-Zip: DEERFIELD BEACH FL 33441

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

Title ASST. SECRETARY  
Name PALERMO, MARIE  
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: BERGE , NJAAL**

**PRESIDENT**

**02/22/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date