2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709785

Entity Name: STERLING VILLAGE CONDOMINIUM INC.

Current Principal Place of Business:

500 SOUTH FEDERAL HWY. BOYNTON BEACH, FL 33435

Current Mailing Address:

500 SOUTH FEDERAL HWY. BOYNTON BEACH, FL 33435

FEI Number: 59-1111572 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACKER LAW FIRM PA 400 S DIXIE HIGHWAY STE 420 BOCA RATON, FL 33432 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

FILED Mar 13, 2015

Secretary of State

CC3215655883

Officer/Director Detail:

Title	TREASURER	Title	VICE PRESIDENT
Name	NUGENT, MARGARET	Name	MUGHMAW, RAYMOND
Address	610 HORIZONS E.306	Address	230 HORIZONS EAST # 103
City-State-Zip:	BOYNTON BEACH FL 33435	City-State-Zip:	BOYNTON BEACH FL 33435

Title **PRESIDENT** Title DIRECTOR

Name FITZPATRICK, WILLIAM COOPRIDER, EDMUND Name

Address 800 HORIZONS WEST APT 103 Address 340 HORIZONS WEST, APT 108 **BOYNTON BEACH FL 33435** City-State-Zip: City-State-Zip: **BOYNTON BEACH FL 33435**

Title DIRECTOR Title **SECRETARY**

Name DOWNEY, MICHAEL Name BUONI, BUTCH

Address 340 HORIZONS WEST APT. 101 450 HORIZONS WEST APT 304 Address City-State-Zip: BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name MATTHEWS, GARY KOCHERSPERGER, JAMES Name

450 HORIZONS EAST, APT. 107 Address 300 HORIZONS WEST APT. 207 Address

City-State-Zip: BOYNTON BEACH FL BOYNTON BEACH FL 33435 City-State-Zip:

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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.

03/13/2015 SIGNATURE: MARGARET NUGENT **TREASURER**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name SLOAN, GAIL

Address 350 HORIZONS WEST APT. 104

City-State-Zip: BOYNTON BEACH FL