

2020 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:**SEACREST SERVICES
2101 CENTREPARK W DR 110
WEST PALM BEACH, FL 33409 US**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**Officer/Director Detail :**

Title	PRESIDENT
Name	BUONI, BONI "BUTCH"
Address	450 HORIZONS E 304
City-State-Zip:	BOYNTON BEACH FL 33435

Title	VP
Name	MATTHEWS, GARY
Address	111 NORTH RIDGE ESTATES 4
City-State-Zip:	TROY NY 12182

Title	TREASURER
Name	NUGENT, MARGARET
Address	610 HORIZONS E 306
City-State-Zip:	BOYNTON BEACH FL 33435

Title	SECRETARY
Name	WIBLE, BONNIE
Address	2617 W WOODWARD DR
City-State-Zip:	MUNCIE IN 47304

Title	DIRECTOR
Name	COOPRIDER, EDMUND
Address	340 HORIZONS W 108
City-State-Zip:	BOYNTON BEACH FL 33435

Title	DIRECTOR
Name	KEOGH, JOHN
Address	620 HORIZONS W 210
City-State-Zip:	BOYNTON BEACH FL 33435

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: BONI "BUTCH" BUONI**PRESIDENT****01/22/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date