

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710404

Entity Name: BOCA VERDE EAST CONDOMINIUM, INC.**Current Principal Place of Business:**400 NE 20TH STREET, OFFICE
BOCA RATON, FL 33431**Current Mailing Address:**400 NE 20TH STREET
OFFICE
BOCA RATON, FL 33431 US**FEI Number:** 59-1213398**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAVIS, KEN
400 NE 20TH ST, C116
BOCA RATON, FL 33431 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:** KEN DAVIS

04/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DAVIS, KEN
Address 400 NE 20TH ST, A214
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name TARKA, JOHN
Address 400 NE 20TH ST
 B112
City-State-Zip: BOCA RATON FL 33431

Title VP
Name WOODBURY, JOANNE
Address 400 NE 20TH STREET
 # D-210
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name DITANNO, DANNY
Address 400 NE 20TH STREET
 # B-116
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name MINEROWICZ, FRANK
Address 400 NE 20TH ST
 D301
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY
Name DUENSTER, HELGA
Address 400 NE 20TH STREET
 B 201
City-State-Zip: BOCA RATON FL 33431

Title TREASURER
Name LUSTIG, RALPH
Address 400 NE 20TH STREET
 # D-103
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name ESTERVEZ, ELIA
Address 400 NE 20TH STREET
City-State-Zip: BOCA RATON FL 33431

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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.

SIGNATURE: KEN DAVIS

PRESIDENT

04/16/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MERLUZZO, PHYLLIS
Address	400 NE 20TH STREET # D-315
City-State-Zip:	BOCA RATON FL 33431