

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712387

**Entity Name:** LA RENAISSANCE NO. 1, CONDOMINIUM, INC.

**Current Principal Place of Business:**

3230 S OCEAN BLVD  
PALM BEACH, FL 33480

**Current Mailing Address:**

3230 S OCEAN BLVD  
PALM BEACH, FL 33480 US

**FEI Number: 59-1228484**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FIELDS & BACHOVE, PLLC  
4440 PGA BLVD  
SUITE 308  
PALM BEACH GARDENS, FL 33410 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: EVAN BACHOVE**

**04/30/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HAMMER, JOHN  
Address        3230 SOUTH OCEAN BLVD. # 303  
City-State-Zip: PALM BEACH FL 33480

Title            VP  
Name            REYNOLDS, MIKE  
Address        3230 SOUTH OCEAN BLVD. # 607  
City-State-Zip: PALM BEACH FL 33480

Title            TREASURER  
Name            PAOLELLA, CHRIS TREASURER  
Address        3230 SOUTH OCEAN BLVD. #311  
City-State-Zip: PALM BEACH FL 33480

Title            SECRETARY  
Name            CHERUBIN, CARLOS  
Address        3230 SOUTH OCEAN BLVD. # 501  
City-State-Zip: PALM BEACH FL 33480

Title            DIRECTOR  
Name            FILIPPIDIS, GEORGE  
Address        3230 SOUTH OCEAN BLVD. #409  
City-State-Zip: PALM BEACH FL 33480

Title            DIRECTOR  
Name            MARICHAL, FRANK DIRECTOR  
Address        3230 SOUTH OCEAN BLVD. # 101  
City-State-Zip: PALM BEACH FL 33480

Title            DIRECTOR  
Name            KINGSLEY, JAMES  
Address        3230 SOUTH OCEAN BLVD. # 402  
City-State-Zip: PALM BEACH FL 33480

*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: JOHN HAMMER**

**PRESIDENT**

**04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date