

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712779

Entity Name: TAMBERLANE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5530 TAMBERLANE CIRCLE
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**C/O COMPLETE PROPERTY MANAGEMENT, INC.
3307 NORTHLAKE BLVD., SUITE 107
PALM BEACH GARDENS, FL 33403 US**FEI Number:** 59-1210191**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEWIS, WILLIAM
3307 NORTHLAKE BLVD
STE 107
PALM BEACH GARDENS, FL 33403 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	SCOTTO, REGINA
Address	5570 TAMBERLANE CIRCLE APT. 330
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	MICHALCZYN, SHARYN
Address	5580 TAMBERLANE CIRCLE # 136
City-State-Zip:	PALM BEACH GARDENS FL 33403

Title	DIRECTOR
Name	PATTERSON, MARY LU
Address	5570 TAMBERLANE CIRCLE 230
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	FOX, LORRAINE
Address	5520 TAMBERLANE CIRCLE # 220
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	KATZ, LORIN
Address	5580 TAMBERLANE CIRCLE 233
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	CHUMNEY, CHERYL
Address	5560 TAMBERLANE CIRCLE 324
City-State-Zip:	PALM BEACH GARDENS FL 33418

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: REGINA SCOTTO

PRESIDENT

04/05/2018

Electronic Signature of Signing Officer/Director Detail

Date