

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713401

Entity Name: THE FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**333 SUNSET DRIVE
FORT LAUDERDALE, FL 33301**Current Mailing Address:**333 SUNSET DRIVE
FORT LAUDERDALE, FL 33301**FEI Number:** 59-1196724**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WASSERSTEIN, P.A.
301 TAMATO ROAD, SUITE 2199
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	PIKE, JEFF
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	DIRECTOR
Name	HANBURY, GEORGE L II
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	SECRETARY
Name	ROTH, PATRICIA
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	ASST. SECRETARY
Name	NOUDEWO, LYNN
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	PRESIDENT
Name	FLETCHER, GEORGE
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	VP
Name	COSGROVE, DAVE L
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	DIRECTOR
Name	VANIN, ORLANDO L
Address	333 SUNSET DRIVE
City-State-Zip:	FORT LAUDERDALE FL 33301

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: GEORGE FLETCHER**PRESIDENT****04/14/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date