

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 714157

**Entity Name:** VIRGINIAN APARTMENTS OF POMPANO BEACH, INC.

**Current Principal Place of Business:**

370 SOUTH CYPRESS ROAD  
OFFICE  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

370 SOUTH CYPRESS ROAD  
OFFICE  
POMPANO BEACH, FL 33060 US

**FEI Number:** 59-1229740

**Certificate of Status Desired:** Yes

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

KAYE BENDER REMBAUM P.L.  
1200 PARK CENTRAL BOULEVARD SOUTH  
POMPANO BEACH, FL 33064 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:** LISA A. MAGILL

05/19/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           STIPP, CHERYL  
Address       330 S CYPRESS RD  
                  APT 602  
City-State-Zip: POMPANO BEACH FL 33060

Title           DIRECTOR  
Name           ST JOHN, VINCENT  
Address       418 S CYPRESS RD  
                  APT 130  
City-State-Zip: POMPANO BEACH FL 33060

Title           ASST. TREASURER  
Name           ANDREAS, BYRON  
Address       350 S CYPRESS RD  
                  APT 527  
City-State-Zip: POMPANO BEACH FL 33060

Title           SECRETARY  
Name           EICHOLZ, MATTHEW  
Address       406 S CYPRESS ROAD  
                  APT 328  
City-State-Zip: POMPANO BEACH FL 33060

Title           DIRECTOR  
Name           CADIENTE, BELINDA  
Address       412 S CYPRESS ROAD  
                  APT 221  
City-State-Zip: POMPANO BEACH FL 33060

Title           VP  
Name           MEARS, WINIFRED  
Address       400 S CYPRESS RD  
                  APT 424  
City-State-Zip: POMPANO BEACH FL 33060

Title           PRESIDENT  
Name           SEVERANCE, HAROLD  
Address       406 S CYPRESS RD  
                  APT 302  
City-State-Zip: POMPANO BEACH FL 33060

*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:** HAROLD SEVERANCE

PRESIDENT

05/19/2022

Electronic Signature of Signing Officer/Director Detail

Date