

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720845

Entity Name: NO.1 CONDOMINIUM ASSOCIATION OF PARADISE HARBOUR
OF NORTH PALM BEACH, INC.**FILED**
Mar 28, 2020
Secretary of State
0455789025CC**Current Principal Place of Business:**100 PARADISE HARBOUR BLVD.
NORTH PALM BEACH, FL 33408**Current Mailing Address:**100 PARADISE HARBOUR BLVD.
NORTH PALM BEACH, FL 33408 US**FEI Number: 59-1357778****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VERMA, RAJAT
2889 BELLAROSA CIR
ROYAL PALM BEACH, FL 33411 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: RAJAT VERMA****03/28/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BERKENFELD, SANDRA
Address 100 PARADISE HARBOUR BLVD.
 # 506
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name THOMAS, DONNA
Address 100 PARADISE HARBOUR BLVD.
 # 203
City-State-Zip: NORTH PALM BEACH FL 33408

Title SECRETARY
Name DIPONIO, ANTHONY
Address 100 PARADISE HARBOUR BLVD
 # 104
City-State-Zip: NORTH PALM BEACH FL 33408

Title TREASURER
Name TERRY, KROK
Address 100 PARADISE HARBOUR BLVD.
 # 303
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name ARTMAN, JOHN
Address 100 PARADISE HARBOUR BLVD
 # 512
City-State-Zip: NORTH PALM BEACH FL 33408

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: SANDRA BERKENFELD**P****03/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date