

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720877

Entity Name: EMERALD CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**

C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
LAUDERDALE LAKES, FL 33319 US

FEI Number: 59-1399406**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

HOLLANDER, GOODE & LOPEZ, PA
314 SOUTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004 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: MATTHEW GOODE, ESQ.

05/22/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name WRIGHT , COLLEEN
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title TREASURER
Name KERR , CARLTON
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name JONES, NOREEN
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name WILKIN, HILLIS
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title PRESIDENT
Name HOYTE, ANGELA
Address 4141 NW 44TH AVE
120
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name RODNEY, JEAN
Address 4141 NW 44TH AVE
420
City-State-Zip: LAUDERDALE LAKES FL 33319

Title SECRETARY
Name ROWE, DESMIE
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name FIORANTE , CONCETTA
Address C/O PHOENIX MANAGEMENT SERVICES
4800 N.STATE ROAD 7 105
City-State-Zip: LAUDERDALE LAKES FL 33319

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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: ANGELA HOYTE

PRESIDENT

05/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	AGATE , ROBYN
Address	C/O PHOENIX MANAGEMENT SERVICES 4800 N.STATE ROAD 7 105
City-State-Zip:	LAUDERDALE LAKES FL 33319