2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720877

Entity Name: EMERALD CONDOMINIUM ASSOCIATION, INC.

FILED Apr 06, 2022 Secretary of State 2823194456CC

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT SERVICES 4800 N.STATE ROAD7 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. 04/06/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Address

Title **DIRECTOR** Title **PRESIDENT** Name WRIGHT, COLLEEN Name HOYTE, ANGELA Address C/O PHOENIX MANAGEMENT Address 4141 NW 44TH AVE **SERVICES**

4800 N.STATE ROAD 7 105 City-State-Zip: LAUDERDALE LAKES FL 33319

LAUDERDALE LAKES FL 33319 City-State-Zip:

DIRECTOR Title Title **TREASURER**

JOHNSON, TERRY Name

Name EDWARDS, SONDRA C/O PHOENIX MANAGEMENT Address

C/O PHOENIX MANAGEMENT **SERVICES**

SERVICES 4800 N.STATE ROAD 7 105 4800 N.STATE ROAD 7 105

City-State-Zip: LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319 City-State-Zip:

Title **SECRETARY**

Title DIRECTOR Name ETGHAY, FARHAD

JONES, NOREEN Name Address C/O PHOENIX MANAGEMENT

Address C/O PHOENIX MANAGEMENT **SERVICES**

> 4800 N.STATE ROAD 7 105 **SERVICES**

4800 N.STATE ROAD 7 105 City-State-Zip: LAUDERDALE LAKES FL 33319

LAUDERDALE LAKES FL 33319 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

FIORANTE, CONCETTA Name

Name WATSON, LILLIAN Address C/O PHOENIX MANAGEMENT

Address C/O PHOENIX MANAGEMENT **SERVICES**

> SERVICES 4800 N.STATE ROAD 7 105

City-State-Zip: LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319 City-State-Zip:

Continues on page 2

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.

PRESIDENT 04/06/2022 SIGNATURE: ANGELA HOYTE

Electronic Signature of Signing Officer/Director Detail

4800 N.STATE ROAD 7 105

Date

Officer/Director Detail Continued:

Title

WILLIAMS, LYNETTE Name

C/O PHOENIX MANAGEMENT SERVICES 4800 N.STATE ROAD7 105 Address

City-State-Zip: LAUDERDALE LAKES FL 33319