## **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 722115** 

Entity Name: TRIANON CONDOMINIUM APARTMENTS ASSOCIATION, INC.

FILED Feb 06, 2019 Secretary of State 3303525894CC

02/06/2019

## **Current Principal Place of Business:**

1200 SOUTH FLAGLER DRIVE WEST PALM BEACH. FL 33401

## **Current Mailing Address:**

1200 SOUTH FLAGLER DRIVE WEST PALM BEACH, FL 33401

FEI Number: 59-1500005 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KONYK & LEMME PLLC KONYK & LEMME PLLC 140 INTRACOASTAL POINTE DRIVE SUITE 310 JUPITER, FL 33477 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: THERESA M. LEMME, ESQ.

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name COFFIN, ADRIENNE M Name SCHNEIDER, GARY

Address 1200 SOUTH FLAGLER DRIVE Address 1200 SOUTH FLAGLER DRIVE

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title T Title SECRETARY

Name CANTONE, PHIL Name SEGRAVES, PAT

Address 1200 SOUTH FLAGLER DRIVE Address 1200 SOUTH FLAGLER DRIVE

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR

Name WINKLER, SHIRLEY

Address 1200 SOUTH FLAGLER DRIVE
City-State-Zip: WEST PALM BEACH FL 33401

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: ADRIENNE M COFFIN

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/06/2019