

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722913

**Entity Name:** ATLANTIS SHERBROOK VILLAS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 29, 2018**  
**Secretary of State**  
**CC4402013838**

**Current Principal Place of Business:**

ASVCA  
145 ATLANTIS BLVD  
ATLANTIS, FL 33462

**Current Mailing Address:**

1500 GATEWAY BLVD SUITE 220  
BOYNTON BEACH, FL 33426 US

**FEI Number: 59-1475295**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF, P.A.  
1 EAST BROWARD BLVD., SUITE 1800  
FT. LAUDERDALE, FL 33301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           TREASURER  
Name           NEEBE, GAIL  
Address        145 ATLANTIS BLVD #303  
City-State-Zip: ATLANTIS FL 33462

Title           SECRETARY  
Name           MORY, CHARLES  
Address        145 ATLANTIS BLVD. #304  
City-State-Zip: ATLANTIS FL 33462

Title           VP  
Name           EVANS, JUNE  
Address        145 ATLANTIS BLVD. #106  
City-State-Zip: ATLANTIS FL 33462

Title           PRESIDENT  
Name           PLOCKER, LOUIS  
Address        145 ATLANTIS BLVD #302  
City-State-Zip: ATLANTIS FL 33462

Title           DIRECTOR  
Name           NIKULA, LARRY  
Address        145 ATLANTIS BLVD #PH1  
City-State-Zip: ATLANTIS FL 33462

*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: LOUIS PLOCKER**

**PRESIDENT**

**03/29/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date