

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723775

**Entity Name:** POLYNESIAN GARDENS CONDOMINIUMS, INC

**Current Principal Place of Business:**

400 NW 68 AVE  
PLANTATION, FL 33317

**Current Mailing Address:**

400 NW 68 AVE  
PLANTATION, FL 33317 US

**FEI Number:** 59-1479114

**Certificate of Status Desired:** No

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

BASULTO ROBBINS & ASSOCIATES, LLP  
14160 PALMETTO FRONTAGE ROAD  
SUITE 22  
MIAMI LAKES, FL 33016 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:** RUSSELL ROBBINS

04/05/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT	Title	VP
Name	RICHARDSON, CHRIS	Name	PETIT, SERGINIO
Address	400 N W 68TH AVE	Address	400 NW 68 AVE
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317
Title	SECRETARY	Title	TREASURER
Name	SAVER, SHELIA	Name	SAVER, SHELIA
Address	400 N W 68TH AVE	Address	400 NW 68TH AVE
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317
Title	DIRECTOR	Title	DIRECTOR
Name	LONDONO, CARLOS	Name	TARAZZI, TOMER
Address	400 NW 68 AVE	Address	400 NW 68 AVE
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317
Title	DIRECTOR	Title	DIRECTOR
Name	CHEN, CHRISTINA	Name	SASSANO, ROY
Address	400 NW 68 AVE	Address	400 NW 68 AVE
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317

**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.*

**SIGNATURE:** SHELIA SAVER

SECRETARY

04/05/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            SWAN, DEBORAH  
Address        400 NW 68 AVE  
City-State-Zip: PLANTATION FL 33317