

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

DOCUMENT# 724861

**Entity Name:** NEWPORT AT LAUDERHILL ASSOCIATION, INC.

**FILED**  
**Jul 25, 2021**  
**Secretary of State**  
**6169979319CC**

**Current Principal Place of Business:**

C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
TAMARAC, FL 33319

**Current Mailing Address:**

C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
TAMARAC, FL 33319 US

**FEI Number: 59-1488183**

**Certificate of Status Desired: No**

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

KATZ, STEVEN B  
4300 N. UNIVERSITY DR.  
A-106  
LAUDERHILL, FL 33351 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: STEVEN B. KATZ**

**07/25/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SEYRAN, ISIK  
Address C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
City-State-Zip: TAMARAC FL 33319

Title DIRECTOR  
Name WALKER, ALTHIA  
Address C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
City-State-Zip: TAMARAC FL 33319

Title TREASURER  
Name HEWWING, REMA  
Address C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
City-State-Zip: TAMARAC FL 33319

Title PRESIDENT  
Name CHIN, GERALD  
Address C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
City-State-Zip: TAMARAC FL 33319

Title SECRETARY  
Name BLANC, DARLINE  
Address 2333 N. STATE ROAD 7 SUITE S  
City-State-Zip: MARGATE FL 33063

Title VP  
Name MULGRAVE, LAUNTIA  
Address C/O SENECA PROPERTY MANAGEMENT LLC  
4699 N.. STATE ROAD 7 SUITE J2  
City-State-Zip: TAMARAC FL 33319

*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: GERALD CHIN**

**PRESIDENT**

**07/25/2021**

Electronic Signature of Signing Officer/Director Detail

Date