

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727003

Entity Name: WESTWOOD COMMUNITY FIVE ASSOCIATION, INC.

FILED
Feb 06, 2020
Secretary of State
5816296371CC

Current Principal Place of Business:

8300 NW 93RD AVE
TAMARAC, FL 33321

Current Mailing Address:

8300 NW 93RD AVE
TAMARAC, FL 33321

FEI Number: 23-7446541

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM, P.L.
1200 PARK CENTRAL BOULEVARD SOUTH
POMPANO BEACH, FL 33064 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: MICHAEL BENDER

02/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BALINO, RICK
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name BENEDETTO, ANTHONY
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name HALLAS, JAMES
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title SECRETARY
Name PALMAZ, ALEX
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title PRESIDENT
Name KOENIG, ADAM
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title VP
Name LABOMDARDA, THOMAS
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title TREASURER
Name PENALOZA, LUIS
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name TORO, EFRAIN
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321

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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: THOMAS LABOMDARDA

VP

02/06/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILLIAMS, KEVIN
Address 8300 NW 93RD AVE
City-State-Zip: TAMARAC FL 33321