2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT\# 727003

Entity Name: WESTWOOD COMMUNITY FIVE ASSOCIATION, INC.

## 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:

STEVENS \& GOLDWYN, P.A.
2 S. UNIVERSITY DRIVE
SUITE 329
PLANTATION, FL 33324 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: | BRIAN S. GOLDWYN | 04/05/2018 |
| :--- | :--- | :---: |
|  | Date |  |

## Officer/Director Detail :

| Title | DIRECTOR | Title | DIRECTOR |
| :--- | :--- | :--- | :--- |
| Name | VALBUENA, JONATHON | Name | PELEI, MADISON |
| Address | 8300 NW 93RD AVE | Address | 8300 NW 93RD AVE |
| City-State-Zip: | TAMARAC FL 33321 | City-State-Zip: | TAMARAC FL 33321 |
| Title | DIRECTOR | Title | SECRETARY |
| Name | ATHERTON, ROY | Name | COSTA, SARA |
| Address | 8300 NW 93RD AVE | Address | 8300 NW 93RD AVE |
| City-State-Zip: | TAMARAC FL 33321 | City-State-Zip: | TAMARAC FL 33321 |
| Title | TREASURER | Name | VP |
| Name | FRASCHILLA, PAUL | Address | City-State-Zip: |

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: JOHN HARTNETT
VP
04/05/2018
Electronic Signature of Signing Officer/Director Detail
Date

