## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 727151** 

Entity Name: POINTE OVERLOOK CONDOMINIUM ASSOCIATION, INC.

FILED Apr 15, 2014 Secretary of State CC7328508026

## **Current Principal Place of Business:**

2328 S. CONGRESS AVENUE SUITE 2A WEST PALM BEACH, FL 33406

# **Current Mailing Address:**

2328 S. CONGRESS AVENUE SUITE 2A WEST PALM BEACH, FL 33406

FEI Number: 59-1682649 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 625 NORTH FLAGLER DRIVE 7TH FLOOR WEST PALM BEACH, FL 33401 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
 PRESIDENT, DIRECTOR
 Title
 VP, DIRECTOR

 Name
 NELSON, JAMES T
 Name
 HULKKONEN, ESKO

Address 2328 S. CONGRESS AVE., SUITE 2A Address 2328 S. CONGRESS AVE., SUITE 2A City-State-Zip: WEST PALM BEACH FL 33406 City-State-Zip: WEST PALM BEACH FL 33406

Title TREASURER, DIRECTOR Title SECRETARY, DIRECTOR

Name SCHILLER, BOB Name BAKER, GERRY

Address 2328 S. CONGRESS AVE., SUITE 2A Address 2328 S. CONGRESS AVE., SUITE 2A City-State-Zip: WEST PALM BEACH FL 33406 City-State-Zip: WEST PALM BEACH FL 33406

Title DIRECTOR

Name TORNIKOSKI, ERKKI

Address 2328 S. CONGRESS AVE., SUITE 2A

City-State-Zip: WEST PALM BEACH FL 33406

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: JAMES T. NELSON

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/15/2014