## 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 728779** 

Entity Name: OPAL TOWERS WEST CONDOMINIUM ASSOCIATION, INC.

**FILED** Jul 16, 2018 Secretary of State CC8616248631

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

1150 HILLSBORO MILE

ATTN: OFFICE

HILLSBORO BEACH, FL 33062

## **Current Mailing Address:**

1150 HILLSBORO MILE

ATTN: OFFICE

HILLSBORO BEACH, FL 33062

FEI Number: 59-1507782 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BACKER ABOUD POLIAKOFF & FOELSTER/ 400 S. DIXIE HIGHWAY SUITE 420 BOCA RATON, FL 33432 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: BACKER ABOUD POLIAKOFF & FOELSTER 07/16/2018

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Address

Title PRESIDENT Title VICE PRESIDENT, VP

Name JOHNSON, CARL R. Name DILLUVIO, ANTHONY VICE

**PRESIDENT** 1150 HILLSBORO MILE

Address 1150 HILLSBORO MILE ATTN: OFFICE

ATTN: OFFICE HILLSBORO BEACH FL 33062

City-State-Zip: City-State-Zip: HILLSBORO BEACH FL 33062

Title **SECRETARY TREASURER** Title

Name SESSA, ELIZABETH Name BARILLI, NADIA

Address 1150 HILLSBORO MILE 1150 HILLSBORO MILE Address ATTN: OFFICE

ATTN: OFFICE HILLSBORO BEACH FL 33062 City-State-Zip:

City-State-Zip: HILLSBORO BEACH FL 33062

Title DIRECTOR Title DIRECTOR

FIORILLO, JOHN Name Name HENSLEY, DAVID

1150 HILLSBORO MILE Address 1150 HILLSBORO MILE Address

ATTN: OFFICE ATTN: OFFICE

City-State-Zip: HILLSBORO BEACH FL 33062 City-State-Zip: HILLSBORO BEACH FL 33062

Title DIRECTOR

Name CAPOGNA, LORETTO

Address 1150 HILLSBORO MILE ATTN: OFFICE

HILLSBORO BEACH FL 33062 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.

07/16/2018 SIGNATURE: CARL JOHNSON **PRESIDENT**