

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728779

**Entity Name:** OPAL TOWERS WEST CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Feb 02, 2022**  
**Secretary of State**  
**1100988620CC**

**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 US

**FEI Number: 59-1507782**

**Certificate of Status Desired: No**

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

PEYTONBOLIN  
3343 W COMMERCIAL BOULEVARD  
STE 100  
FORT LAUDERDALE, FL 33309 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: NATALY GUTERREZ**

**02/02/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FIORILLO, JOHN  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 807  
City-State-Zip: HILLSBORO BEACH FL 33062

Title VP  
Name MONDRONE, FRANK  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 715  
City-State-Zip: HILLSBORO BEACH FL 33062

Title S  
Name DILLUVIO, ANTHONY  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 909  
City-State-Zip: HILLSBORO BEACH FL 33062

Title T  
Name CORIGLIANO, ANTHONY  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 808  
City-State-Zip: HILLSBORO BEACH FL 33062

Title D  
Name MAZZILLI, PAUL  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 714  
City-State-Zip: HILLSBORO BEACH FL 33062

Title D  
Name PAPPAS, JOHN  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE  
City-State-Zip: HILLSBORO BEACH FL 33062

Title D  
Name SESSA, ELIZABETH  
Address 1150 HILLSBORO MILE  
ATTN: OFFICE 315  
City-State-Zip: HILLSBORO BEACH FL 33062

*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: FRANK MONDRONE**

**VP**

**02/02/2022**

Electronic Signature of Signing Officer/Director Detail

Date