

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728948

FILED
Jan 18, 2021
Secretary of State
7091335593CC**Entity Name:** MISSIONWOOD AT MIRAMAR CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8381 S. MISSIONWOOD CIRCLE
MIRAMAR, FL 33025**Current Mailing Address:**C/O STROEMER & COMPANY LLC
14400 NW 77 CT SUITE 206
MIAMI, FL 33016 US**FEI Number: 59-1506683****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHENDELL & ASSOCIATES, P.A.
635 SE 10 STREET, SUITE 635A
DEERFIELD BEACH, FL 33441 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	SECRETARY
Name	FISHER, ELAINE
Address	3000 W. MISSIONWOOD LN
City-State-Zip:	MIRAMAR FL 33025
Title	DIRECTOR
Name	JOHNSON, ANGELA
Address	3037 EAST MISSIONWOOD CIR
City-State-Zip:	MIRAMAR FL 33025
Title	DIRECTOR
Name	DALEY, HESLOP
Address	2914 EAST MISSIONWOOD LANE
City-State-Zip:	MIRAMAR FL 33025
Title	DIRECTOR
Name	WOERDINGS, PEREZ
Address	3034 E. MISSIONWOOD CIRCLE
City-State-Zip:	MIRAMAR FL 33025

Title	TREASURER
Name	WALLERSTEIN, YACOV
Address	3981 NORTH 42 TERRACE
City-State-Zip:	HOLLYWOOD FL 33021
Title	DIRECTOR
Name	WILLIAMS, MICHELLE
Address	8359 S. MISSIONWOOD CIRCLE
City-State-Zip:	MIRAMAR FL 33025
Title	PRESIDENT
Name	O'HARA, MICHAEL
Address	3027 WEST MISSIONWOOD LANE
City-State-Zip:	MIRAMAR FL 33025
Title	DIRECTOR
Name	LACOSTE, CARLINNE BERICE
Address	3009 E. MISSIONWOOD LANE
City-State-Zip:	MIRAMAR FL 33025

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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: MICHAEL O'HARA**PRESIDENT****01/18/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	VP
Name	BAILEY, ZONEY
Address	8351 SOUTH MISSIONWOOD CIRCLE
City-State-Zip:	MIRAMAR FL 33025