

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730115

Entity Name: CLOISTER OF ATLANTIC BEACH CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 08, 2022
Secretary of State
8572992570CC

Current Principal Place of Business:

10 10TH ST
ATLANTIC BEACH, FL 32233

Current Mailing Address:

10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
JACKSONVILLE, FL 32256 US

FEI Number: 59-1655955

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STELLAR PROPERTIES OF NORTH FLORIDA
10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
JACKSONVILLE, FL 32256 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 DIRECTOR
Name COPLAN, CAROLE
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title PRESIDENT
Name BROWN, ALISON
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title S
Name STEVENS, MARGIE
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER
Name GLEIT, ALAN
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name WAJSMAN, ZEV
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name POWELL, DOTTIE
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SHEINBERG, RUBIN
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name BRIDGER, LARRY
Address 10151 DEERWOOD PK BLVD.
BLDG 200, STE 250
City-State-Zip: JACKSONVILLE FL 32256

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: ALISON BROWN

PRESIDENT

04/08/2022

Electronic Signature of Signing Officer/Director Detail

Date