

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730279

Entity Name: EMBASSY CONDOMINIUM APARTMENTS ASSOCIATION, INC.

FILED
Apr 29, 2022
Secretary of State
9435706819CC

Current Principal Place of Business:

2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT SERVICES
FORT LAUDERDALE, FL 33311

Current Mailing Address:

2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT SERVICES
FORT LAUDERDALE, FL 33311 US

FEI Number: 59-2262882

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROYALE MANAGEMENT SERVICES
2319 N ANDREWS AVENUE
FORT LAUDERDALE, FL 33311 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: LORRI M HILL

04/29/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GREENBERG, ELIZABETH
Address 2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT
SERVICES
City-State-Zip: FORT LAUDERDALE FL 33311

Title TREASURER, SECRETARY
Name THEESE, DONNA
Address 2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT
SERVICES
City-State-Zip: FORT LAUDERDALE FL 33311

Title DIRECTOR
Name COTE, ARTHUR
Address 2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT
SERVICES
City-State-Zip: FORT LAUDERDALE FL 33311

Title PRESIDENT
Name HALE, SCOTT
Address 2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT
SERVICES
City-State-Zip: FORT LAUDERDALE FL 33311

Title DIRECTOR
Name LINDELL, STEFAN
Address 2319 N ANDREWS AVE
C/O ROYALE MANAGEMENT
SERVICES
City-State-Zip: FORT LAUDERDALE FL 33311

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: SCOTT HALE

PRESIDENT

04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date