

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735428

**Entity Name:** PASEOS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MITCHELL MANAGEMENT OF BOCA RATON  
3901 N. FEDERAL HWY  
BOCA RATON, FL 33431

**Current Mailing Address:**

C/O MITCHELL MANAGEMENT OF BOCA RATON  
3901 N. FEDERAL HWY  
BOCA RATON, FL 33431

**FEI Number:** 59-1797528

**Certificate of Status Desired:** No

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

MITCHELL MANAGEMENT OF BOCA RATON INC.  
2081 NW 25TH STREET  
BOCA RATON, FL 33431 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            PRESIDENT  
Name            BASS, SINDI  
Address        20783 SONETO DRIVE  
City-State-Zip: BOCA RATON FL 33433

Title            D  
Name            KABBEJ, PATRICK  
Address        20920 RAMITA TRAIL  
City-State-Zip: BOCA RATON FL 33433

Title            SECRETARY  
Name            LIPPMAN, BETH  
Address        20897 ENCANTO COURT  
City-State-Zip: BOCA RATON FL 33433

Title            TREASURER  
Name            GARRETT, DREW  
Address        20905 MORADA COURT  
City-State-Zip: BOCA RATON FL 33433

Title            VP  
Name            PERDOMO, JORGE  
Address        20889 ENCANTO COURT  
City-State-Zip: BOCA RATON FL 33433

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:** SINDI BASS

**PRESIDENT**

**03/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date