

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736245

**Entity Name:** THE HORIZONS OF BOCA LAGO CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**9039 VISTA DEL LAGO  
BOCA RATON, FL 33428-3149**Current Mailing Address:**9039 VISTA DEL LAGO  
BOCA RATON, FL 33428-3149 US**FEI Number: 59-1709661****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**KLEIN, MILBERG  
5550 GLADES RD STE 500  
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            INVIDIATA, BARBARA  
Address        21876 CYPRESS CIRCLE #32A  
City-State-Zip: BOCA RATON FL 33433

Title            VP  
Name            STEPHENS, TINA  
Address        21846 CYPRESS CIRCLE #29B  
City-State-Zip: BOCA RATON FL 33433

Title            SECRETARY  
Name            TEETERS, SHEILA  
Address        21643 CYPRESS ROAD #14E  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            BACH, SHERI  
Address        8383 CYPRESS LANE #9D  
City-State-Zip: BOCA RATON FL 33433

Title            TREASURER  
Name            MANZUTTO, CAROL  
Address        21830 CYPRESS CIRCLE #27A  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            STIGGERS, DAVID  
Address        21746 CYPRESS DRIVE #18A  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            FRANKLIN, ANDREA  
Address        21676 CYPRESS RD. # 12B  
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: BARBARA INVIDIATA****PRESIDENT****03/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date