

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738807

FILED
Apr 30, 2024
Secretary of State
8936239796CC

Entity Name: ESTATES OF ALPINE WOODS ASSOCIATION, INC.

Current Principal Place of Business:

C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
WEST PALM BEACH, FL 33411

Current Mailing Address:

C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
WEST PALM BEACH, FL 33411 US

FEI Number: 59-1801051

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRAVIT LAW, P.A.
2101 NW CORPORATE BLVD.
SUITE 410
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 DIRECTOR
Name O'REILLY, NATHALIE
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name RAMIREZ, JUAN
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name BORGE, ROBERTO
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title PRESIDENT
Name SAGITOVA, ELENA
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title VP
Name CRABTREE, MARIE
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title TREASURER
Name CORREA, JAIR
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title SECRETARY
Name MCPHEE, SONIA
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name GEMMILL, BILLIE
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411

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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: SAGITOVA , ELENA

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name DOTEN, CLAIRE
Address C/O JILSA MANAGEMENT LLC
2054 VISTA PARKWAY, SUITE 400
City-State-Zip: WEST PALM BEACH FL 33411