

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739042

Entity Name: NEWPORT "S" CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4098 NEWPORT S
DEERFIELD BEACH, FL 33442**Current Mailing Address:**2400 CENTRE PARK W DRIVE
SUITE 175
WEST PALM BEACH, FL 33409**FEI Number:** 59-1936812**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PICKAR, RITA
4098 NEWPORT S
DEERFIELD BEACH, FL 33442 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	P
Name	PICKAR, RITA
Address	4098 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	S
Name	JURKOWSKI, MARY SUE
Address	1083 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	D
Name	BAGGOTT, JOHN
Address	3100 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	DIRECTOR
Name	NUDELMAN, ELAINE
Address	3091 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VP
Name	BERKOWITZ, CLAIRE
Address	1099 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	T
Name	ISAACS, FRIEDA
Address	1091 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	D
Name	BACHELLOR, ROLAND
Address	1097 NEWPORT S
City-State-Zip:	DEERFIELD BEACH FL 33442

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: RITA PICKAR**PRESIDENT****04/05/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date