

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741783

Entity Name: SALISBURY E. CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 01, 2016
Secretary of State
CC8181015186

Current Principal Place of Business:

C/O JEAN POWERS
100 SALISBURY E
WEST PALM BEACH, FL 33417

Current Mailing Address:

SALISBURY E C/O SEACREST SERVICES INC
2400 CENTREPARK W DR #175
WEST PALM BEACH, FL 33409 US

FEI Number: 59-2507825

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWERS, JEAN
5405 OKEECHOBEE BLVD
STE 202
WEST PALM BEACH, FL 33417 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: JEAN POWERS

04/01/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name AGGARWAL, SAM
Address 115 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER
Name LASSOND, MARIEL LUZON
Address 116 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title VP
Name POWERS, JEAN
Address 100 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY
Name FEIMESTER, JAY
Address 103 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name ORIEL, ALFRED
Address 109 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name PIERRE, JOSEPH
Address 101 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name BEVERLEY, MIKE
Address 110 SALISBURY E
City-State-Zip: WEST PALM BEACH FL 33417

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: SAM AGGARWAL BY GALE T

PRESIDENT

04/01/2016

Electronic Signature of Signing Officer/Director Detail

Date