

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742481

Entity Name: NORWICH G CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**158 NORWICH G
WEST PALM BEACH, FL 33417**Current Mailing Address:**NORWICH G C/O SEACREST SERVICES INC
2400 CENTREPARK W DR #175
WEST PALM BEACH, FL 33409 US**FEI Number:** 65-0045417**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VELDHVIZEN, JOAN
158 NORWICH G
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:** JOAN VELDHVIZEN

04/13/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MARKOWITZ, JUDI
Address 99-40 63RD ROAD
9J
City-State-Zip: REGO PARK NY 11374

Title VP
Name VELDHVIZEN, JOAN
Address 158 NORWICH G
City-State-Zip: WEST PALM BEACH FL 33417

Title D
Name SHATRAVKA, IRINA
Address 147 NORWICH G
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name MANCINI, RENEE
Address 157 NORWICH G
City-State-Zip: WEST PALM BEACH FL 33417

Title T
Name SAAVEDRA, JOSE
Address 162 NORWICH G
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY
Name IMBRIALE, LYDIA
Address 166 NORWICH G
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name MANCINI, RENEE
Address 157 NORWICH G
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: JOAN VELDHVIZEN

VICE PRESIDENT

04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date