

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742742

**Entity Name:** ANDOVER K CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**266 ANDOVER K  
WEST PALM BEACH, FL 33417**Current Mailing Address:**ANDOVER K C/O SEACREST SERVICES INC  
2101 CENTREPARK W DRIVE #110  
WEST PALM BEACH, FL 33409 US**FEI Number:** 59-1636128**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.  
625 N. FLAGLER DRIVE, 7TH FLOOR  
WEST PALM BEACH, FL 33401 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	TREASURER
Name	STUART, GOLDSTEIN
Address	269 ANDOVER K
City-State-Zip:	WEST PALM BEACH FL 33417

Title	VP, SECRETARY
Name	MUNN, ALAN
Address	270 ANDOVER K
City-State-Zip:	WEST PALM BEACH FL 33417

Title	DIRECTOR
Name	KOUTEK, GREG
Address	275 ANDOVER K
City-State-Zip:	WEST PALM BEACH FL 33417

Title	PRESIDENT, SECRETARY
Name	HAMMETT, DIANE
Address	266 ANDOVER K
City-State-Zip:	WEST PALM BEACH FL 33417

Title	DIRECTOR
Name	HU, PAUL
Address	262 ANDOVER K
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:** DIANE HAMMETT, SL**PRESIDENT****05/31/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date