

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742748

**FILED**  
**Feb 24, 2015**  
**Secretary of State**  
**CC8556558782**

**Entity Name:** CANTERBURY D CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

80 CANTERBURY DR.  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

80 CANTERBURY DR.  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 59-1804495

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BLOOM, FRANCES E  
80 CANTERBURY D  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BLOOM, FRANCES  
Address 80 CANTERBURY D  
City-State-Zip: WEST PALM BEACH FL 33417

Title VP  
Name MYRICK, GARY  
Address 94 CANTERBURY D  
City-State-Zip: WEST PALM BEACH FL 33417

Title TR  
Name ARCAND, DOT  
Address 92 CANTERBURY D  
City-State-Zip: WEST PALM BEACH FL 33417

Title S  
Name HESS, JOHN  
Address 81 CANTERBURY D  
City-State-Zip: W PALM BEACH FL 33417

Title DIRECTOR  
Name PAGAN, CHARLES  
Address 78 CANTERBURY D  
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR  
Name ARCAND, RAYMOND  
Address 92 CANTERBURY D  
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:** DOT ARCAND

**TRESURER**

**02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date