

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742758

Entity Name: COVENTRY J CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**240 COVENTRY J
WEST PALM BEACH, FL 33417-6777**Current Mailing Address:**C/O GALLAGHER P.M. INC.
905 NW 10TH ST
BOYNTON BEACH, FL 33426 US**FEI Number:** 59-1830613**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALLAGHER PM INC
905 NW 10TH ST
BOYNTON BEACH, FL 33426 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:** PHIL GALLAGHER

05/22/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FRIEDMAN, JOSEPH
Address 220 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name ORTIZ, GERMAINE
Address 217 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title VP
Name POULIN, YVAN
Address 231 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title P
Name PISCITELLI, LOUIS
Address 240 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY
Name QUESNELLE, DIANNA
Address 239 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name SHERMAN, BOB
Address 225 COVENTRY J
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER
Name RAMOS, RUBEN
Address 221 COVENTRY J
City-State-Zip: W 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: LOUIS PISCITELLI**PRESIDENT**

05/22/2017

Electronic Signature of Signing Officer/Director Detail

Date