## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 742783** 

Entity Name: SALISBURY D CONDOMINIUM ASSOCIATION, INC.

FILED Apr 26, 2017 Secretary of State CC1469604249

## **Current Principal Place of Business:**

79 SALISBURY D

WEST PALM BEACH, FL 33417

# **Current Mailing Address:**

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

FEI Number: 59-1730323 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BECKER & POLIAKOF, P.A. 625 NORTH 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:

TitleDIRECTORTitleSECRETARYNameGAWRONIAK, ROBERTNameCAGNEY, JOHNAddress85 SALSBURY DAddress81 SALISBURY D

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER Title F

NameNOLLMAN, RAYMONDNameDUNCAN, SHARONAddress87 SALISBURY DAddress79 SALISBURY D

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title VP Title DIRECTOR

Name WECHLER, ARNOLD Name WEISMAN, MARTIN S
Address 76 SALISBURY D Address 92 SALISBURY D

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR

Name FRIEDMAN, IRIS

Address 74 SALISBURY 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: SHARON DUNCAN (KR)

**PRESIDENT** 

04/26/2017