

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744582

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC6372861205**

**Entity Name:** VICTORIA VILLAGE "F" CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1310 AVENUE OF THE STARS  
COCONUT CREEK, FL 33066

**Current Mailing Address:**

1310 AVENUE OF THE STARS  
COCONUT CREEK, FL 33066 US

**FEI Number:** 59-1814340

**Certificate of Status Desired:** No

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

BRUCE BANDLER  
1310 AVENUE OF THE STARS  
COCONUT CREEK, FL 33066 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 PD  
Name SAMPSON, JOAN  
Address 2901 VICTORIA CIRCLE, APT M-1  
City-State-Zip: COCONUT CREEK FL 33066

Title TD  
Name WRIGHT, BEVERLY  
Address 2901 VICTORIA CIRCLE, APT F-1  
City-State-Zip: COCONUT CREEK FL 33066

Title VPD  
Name FAYAD, RICHARD  
Address 2901 VICTORIA CIRCLE, APT K-4  
City-State-Zip: COCONUT CREEK FL 33066

Title SD  
Name MARGOLIN, HARVEY  
Address 2901 VICTORIA CIRCLE, APT L-2  
City-State-Zip: COCONUT CREEK FL 33066

Title D  
Name SOUSA, JOSEPH  
Address 2901 VICTORIA CIRCLE, APT E-3  
City-State-Zip: COCONUT CREEK FL 33066

*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 SAMPSON

**PRESIDENT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date