

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

DOCUMENT# 745734

**FILED**  
**Apr 05, 2023**  
**Secretary of State**  
**6540414876CC**

**Entity Name:** NOVA GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7060 NOVA GARDENS DRIVE  
DAVIE, FL 33317

**Current Mailing Address:**

PO BOX 19439  
PLANTATION, FL 33318 US

**FEI Number:** 59-1999646

**Certificate of Status Desired:** No

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

BERCOVA, MARIA  
7542 NW 1 PLACE  
PLANTATION, FL 33317 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:** MARIA BERCOVA

04/05/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            DIAZ, JESSICA  
Address        7080 NOVA DRIVE  
                  207B  
City-State-Zip: DAVIE FL 33317

Title            VP, DIRECTOR  
Name            SCOTT, WENDY  
Address        7000 NOVA DR.  
                  306E  
City-State-Zip: DAVIE FL 33317

Title            DIRECTOR  
Name            GARCIA, PATRICIA  
Address        7060 NOVA DRIVE  
                  301C  
City-State-Zip: DAVIE FL 33317

Title            DIRECTOR  
Name            SANTARE , CHARLES  
Address        7060 NOVA DRIVE  
                  302C  
City-State-Zip: DAVIE FL 33317

Title            DIRECTOR  
Name            WESTIN, JEFFREY  
Address        7060 NOVA DRIVE  
                  205C  
City-State-Zip: DAVIE FL 33317

Title            SECRETARY, DIRECTOR  
Name            KHAN, SALIMA  
Address        7000 NOVA DRIVE  
                  107E  
City-State-Zip: DAVIE FL

Title            DIRECTOR  
Name            BERCOVA, MARIA  
Address        7020 NOVA DRIVE  
                  209D  
City-State-Zip: DAVIE FL 33317

Title            DIRECTOR  
Name            SANCHEZ, ANDRES  
Address        7000 NOVA DRIVE  
                  102E  
City-State-Zip: DAVIE FL 33317

**Continues on page 2**

*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:** DIAZ , JESSICA

**PRESIDENT**

04/05/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            OBRER, BELKIS  
Address        7020 NOVA DRIVE  
                  202D  
City-State-Zip: DAVIE FL 33317

Title            DIRECTOR  
Name            LIVINGSTON, BRENDA  
Address        7080 NOVA DRIVE  
                  205B  
City-State-Zip: DAVIE FL