

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746059

Entity Name: CORNWALL AT CENTURY VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
9045 LA FONTANA BLVD. SUITE219
BOCA RATON, FL 33434**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
9045 LA FONTANA BLVD. SUITE219
BOCA RATON, FL 33434 US**FEI Number: 59-2006623****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LIMONGELLI, MICHAEL
3092 CORNWALL E
BOCA RATON, FL 33434 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	PRESIDENT
Name	LIMONGELLI, MICHAEL
Address	3092 CORNWALL E
City-State-Zip:	BOCA RATON FL 33434

Title	VP
Name	ROBERTS, LENORA
Address	3100 CORNWALL E
City-State-Zip:	BOCA RATON FL 33434

Title	TREASURER
Name	WORTREICH, CELIA
Address	1083 CORNWALL E
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	WEXLER, RICHARD
Address	1062 CORNWALL D
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR AT LARGE
Name	RICHMOND, HARVEY
Address	3023 CORNWALL B
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	NAWROTH, PHILLIP
Address	3040 CORNWALL B
City-State-Zip:	BOCA RATON FL 33434

Title	SECRETARY
Name	WEXLER, BERTHA
Address	1062 CORNWALL D
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	GELLERMAN, LEONARD
Address	2055 CORNWALL C
City-State-Zip:	BOCA RATON FL 33434

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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: MICHAEL LIMONGELLI**PRESIDENT****04/09/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KAUFMAN, MARILYN
Address	4019 CORNWALL A
City-State-Zip:	BOCA RATON FL 33434