

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746690

**Entity Name:** ANTIGUA VILLAGE I "D" CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 03, 2017**  
**Secretary of State**  
**CC5807424603**

**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: 59-1877206**

**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 SECRETARY  
Name VANDERMAAS, JOSINA  
Address 2502 ANTIGUA TERRACE APT D-2  
City-State-Zip: COCONUT CREEK FL

Title VP  
Name MANAS, ALAN  
Address 2502 ANTIGUA TERRACE APT. E-3  
City-State-Zip: COCONUT CREEK FL 33066

Title PD  
Name GOLDMAN, JACK  
Address 2502 ANTIUGA TERRACE APT. E1  
City-State-Zip: COCONUT CREEK FL 33066

Title DIRECTOR  
Name KELLY, CHRISTINE  
Address 2502 ANTIGUA TERRACE, APT L-2  
City-State-Zip: COCONUT CREEK FL 33066

Title D  
Name COHEN, ARLENE  
Address 2502 ANTIGUA TERRACE APT B-1  
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: JACK GOLDMAN**

**PRESIDENT**

**04/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date