2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749524

Entity Name: ETON COUNTRYSIDE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 21, 2021 **Secretary of State** 8968356069CC

Current Principal Place of Business:

C/O ASSURANCE PROPERTY MANAGEMENT

PO BOX 70247

OAKLAND PARK, FL 33307-0247

Current Mailing Address:

C/O ASSURANCE PROPERTY MANAGEMENT PO BOX 70247

OAKLAND PARK, FL 33307-0247 US

FEI Number: 59-1990891 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKALAR & ASSOCIATES, PA 12472 W ATLANTIC BLVD CORAL SPRINGS, FL 33071 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: MICHAEL BAKALAR 04/21/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT Title Title VΡ

RUIZ. DIANA COX, ALEXANDRIA Name Name

Address C/O ASSURANCE PROPERTY Address C/O ASSURANCE PROPERTY

> MANAGEMENT MANAGEMENT PO BOX 70247 PO BOX 70247

City-State-Zip: OAKLAND PARK FL 33307-0247 City-State-Zip: OAKLAND PARK FL 33307-0247

Title **SECRETARY** Title **TREASURER**

Name STEVENS, CLAUDIA Name VASSALLO, GIAN E

Address C/O ASSURANCE PROPERTY Address C/O ASSURANCE PROPERTY

> **MANAGEMENT MANAGEMENT** PO BOX 70247 PO BOX 70247

OAKLAND PARK FL 33307-0247 OAKLAND PARK FL 33307-0247 City-State-Zip: City-State-Zip:

Title **DIRECTOR** PEREZ, PABLO Name

Address C/O ASSURANCE PROPERTY

> **MANAGEMENT** PO BOX 70247

OAKLAND PARK FL 33307-0247 City-State-Zip:

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.

04/21/2021 **PRESIDENT** SIGNATURE: DIANA RUIZ