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.	

TREASURER

SIGNATURE: CINDY B HALPERN-COHEN

I

Electronic Signature of Signing Officer/Director Detail

Entity Name: CLOVERFIELD HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

7860 CLOVERFIELD CIRCLE BOCA RATON, FL 33433

## **Current Mailing Address:**

7860 CLOVERFIELD CIRCLE BOCA RATON, FL 33433

## FEI Number: 59-2221218

## Name and Address of Current Registered Agent:

SLUSHER, MICHAEL 7890 CLOVERFIELD CIR BOCA RATON, FL 33433 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	E: MICHAEL SLUSHER			06/07/2020	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	TREASURER	Title	PRESIDENT		
Name	HALPERN-COHEN, CINDY BETH	Name	SLUSHER, MICHAEL		
Address	7757 CLOVERFIELD CIR.	Address	7890 CLOVERFIELD CIR		
City-State-Zip:	BOCA RATON FL 33433	City-State-Zip:	BOCA RATON FL 33433		
Title	DIRECTOR	Title	DIRECTOR		
Name	WOLFE, MERYL	Name	NELSON, MAYRA		
Address	7920 CLOVERFIELD CIRCLE	Address	7767 CLOVERFIELD CIR		
City-State-Zip:	BOCA RATON FL 33433	City-State-Zip:	BOCA RATON FL 33433		
Title	VP				
Name	DOBIN, CANDICE				
Address	7931 CLOVERFIELD CIRCLE				
City-State-Zip:	BOCA RATON FL 33433				

Certificate of Status Desired: No

FILED Jun 07, 2020 Secretary of State 5071598638CC

> 06/07/2020 Date