

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751525

Entity Name: PRADERA HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 13, 2017
Secretary of State
CC0165013525

Current Principal Place of Business:

1599 NW 9TH AVENUE
SUITE 2
BOCA RATON, FL 33486

Current Mailing Address:

1599 NW 9TH AVENUE
SUITE 2
BOCA RATON, FL 33486 US

FEI Number: 59-2154960

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GAGLIANO, KAREN ESQ.
955 N NW 17 AVENUE
DELRAY BEACH, FL 33445 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 BONITATIBUS, PETER
Address 1599 NW 9TH AVENUE
SUITE 2
City-State-Zip: BOCA RATON FL 33486

Title PRESIDENT
Name AN, AMY
Address 1599 NW 9TH AVENUE
SUITE 2
City-State-Zip: BOCA RATON FL 33486

Title D
Name GRIFEL, BARBARA
Address 1599 NW 9TH AVENUE
SUITE 2
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR
Name NEEL, BILL
Address 1599 NW 9TH AVENUE
SUITE 2
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR
Name ORBACH, KEN
Address 1599 NW 9TH AVENUE
SUITE 2
City-State-Zip: BOCA RATON FL 33486

Title VP
Name EDGAR, LAURIE
Address 1599 NW 9TH AVENUE
STE. 2
City-State-Zip: BOCA RATON FL 33486

Title TREASURER
Name BASS, KATHY
Address 1599 NW 9TH AVENUE
STE. 2
City-State-Zip: BOCA RATON FL 33486

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: AMY AN

PRESIDENT

04/13/2017

Electronic Signature of Signing Officer/Director Detail

Date