

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758034

FILED
Feb 24, 2020
Secretary of State
7408273282CC**Entity Name:** CHAMPLAIN TOWERS SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8777 COLLINS AVE.
OFFICE
SURFSIDE, FL 33154**Current Mailing Address:**8777 COLLINS AVE.
OFFICE
SURFSIDE, FL 33154 US**FEI Number:** 59-2147701**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
1 EAST BROWARD BLVD.
SUITE 1800
FT. LAUDERDALE, FL 33301 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 C. GONGORA

02/24/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	WODNICKI, JEAN
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	VP
Name	LEVIN, NANCY
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	SECRETARY
Name	CHOUCLA, MARA
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	TREASURER
Name	BRECKER, JOHN
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	DIRECTOR
Name	BRITO, MARGARITA
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	DIRECTOR
Name	GOLDSTEIN, ANNETTE
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

Title	DIRECTOR
Name	GUERRERO, CARLA
Address	8777 COLLINS AVE. OFFICE
City-State-Zip:	SURFSIDE FL 33154

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: JEAN WODNICKI

PRESIDENT

02/24/2020

Electronic Signature of Signing Officer/Director Detail

Date