## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 758279** 

Entity Name: THE RESIDENCES AT SLOAN'S CURVE, INC.

FILED
Jan 09, 2014
Secretary of State
CC6651756234

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

18 SLOAN'S CURVE DR PALM BCH. FL 33480

## **Current Mailing Address:**

18 SLOAN'S CURVE DR PALM BCH. FL 33480 US

FEI Number: 59-2129637 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CASTANEDA, CARLOS 8401 LAKE WORTH RD.. SUITE 227 LAKE WORTH, FL 33467 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: CARLOS CASTANEDA 01/09/2014

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title VP

Name MATHESON, WILLIAM Name SLATER, ELLEN

Address 22 SLOAN'S CURVE DRIVE Address 20 SLOAN'S CURVE DRIVE

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

Title T/S Title MEMB

NameGALES, BARRYNameGRANOFF, LEONARDAddress6 SLOAN CURVE DRAddress14 SLOAN'S CURVE DRIVECity-State-Zip:PALM BEACH FL 33480City-State-Zip:PALM BEACH FL 33480

Title MEMB

Name PEERENBOOM, HAROLD
Address 8 SLOAN'S CURVE DRIVE
City-State-Zip: PALM BEACH FL 33480

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: WILLIAM MATHESON

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/09/2014