#### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 758372** 

Entity Name: HAMLET RESIDENTS ASSOCIATION, INC.

FILED Feb 14, 2020 Secretary of State 3536856761CC

# **Current Principal Place of Business:**

3600 HAMLET DRIVE DELRAY BEACH, FL 33445

# **Current Mailing Address:**

3600 HAMLET DRIVE

DELRAY BEACH. FL 33445 US

FEI Number: 59-2139517 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

KRIVOK, JAMES ESQ. 519 SOUTH MEADOW WOOD WAY STUART, FL 34997 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: JAMES KRIVOK 02/14/2020

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	PRESIDENT	Title	SECRETARY
Name	CHIAPPETTA, LISA	Name	SCHNABEL, NANCY
Address	3600 HAMLET DRIVE	Address	3600 HAMLET DRIVE
City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445

Title VP Title TREASURER

NameDIAMOND, MICHAELNameARANGIO, CHRISTOPHERAddress3600 HAMLET DRIVEAddress3600 HAMLET DRIVECity-State-Zip:DELRAY BEACH FL 33445City-State-Zip:DELRAY BEACH FL 33445

Title DIRECTOR Title DIRECTOR

NameDOEPPER, RICKNameFELBERBAUM, LENNYAddress3600 HAMLET DRIVEAddress3600 HAMLET DRIVE

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR Title DIRECTOR

Name FISCHBEIN, MARGERY

Address 3600 HAMLET DRIVE

City State Zip: DELBAY BEACH EL 3344

City-State-Zip: DELRAY BEACH FL 33445

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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: LISA CHIAPPETTA PRESIDENT 02/14/2020

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameKAYE, BRIANNameRUBIN, GLORIA

Address 3600 HAMLET DRIVE Address 3600 HAMLET DRIVE

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR Title DIRECTOR

Name COLON, DONNA Name DULIN, MARGE

Address 3600 HAMLET DRIVE Address 3600 HAMLET DRIVE

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445