

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765229

**Entity Name:** ST. ANDREWS COUNTRY CLUB, INC.**Current Principal Place of Business:**17557 CLARIDGE OVAL WEST  
BOCA RATON, FL 33496**Current Mailing Address:**17557 CLARIDGE OVAL WEST  
BOCA RATON, FL 33496**FEI Number:** 59-2000688**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORMAN, LARRY ESQ.  
GREENSPOON MARDER LLP.  
2255 GLADES RD. SUITE 400-E  
BOCA RATON, FL 33431 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:** LARRY CORMAN

03/29/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEVEN, MIKE  
Address        17557 CLARIDGE OVAL WEST  
City-State-Zip: BOCA RATON FL 33496

Title            EXEC VICE PRESIDENT  
Name            BLOCK, MICHAEL  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33497

Title            VICE PRESIDENT  
Name            MILICH, ROBIN  
Address        17557 CLARIDGE OVAL WEST  
City-State-Zip: BOCA RATON FL 33496

Title            SECRETARY  
Name            PALUMBO, LISA  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title            TREASURER  
Name            KLEPPER, MARTIN  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title            VICE PRESIDENT  
Name            HOFFNER, RONALD  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title            VICE PRESIDENT  
Name            DOMICO, WILLIAM (WK)  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title            DIRECTOR  
Name            PRESS, ERIC  
Address        17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL

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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 M. PALUMBO**SECRETARY**

03/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SWIDLER, BARRY  
Address 17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR  
Name GOLDMAN, MINDY  
Address 17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR  
Name SATRAN, MARK  
Address 17557 CLARIDGE OVAL  
City-State-Zip: BOCA RATON FL 33496