

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769836

FILED
Mar 17, 2019
Secretary of State
3740939870CC

Entity Name: WESTCHESTER COMMUNITY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O CAMPBELL PROPERTY MANAGEMENT
3918 VIA POINCIANA DRIVE SUITE 9
LAKE WORTH, FL 33467

Current Mailing Address:

C/O CAMPBELL PROPERTY MANAGEMENT
3918 VIA POINCIANA DRIVE SUITE 9
LAKE WORTH, FL 33467 US

FEI Number: 59-2420161

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOLOFF, SCOTT ESQ.
C/O STOLOFF & MANOFF PA
1818 AUSTRALIAN AVE S SUITE 400
WEST PALM BEACH, FL 33409 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 TREASURER
Name GARDNER , SCOTT
Address C/O CAMPBELL PROPERTY
 MANAGEMENT
 3918 VIA POINCIANA DRIVE SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title 1ST VP
Name REEDER, MICHAEL
Address 7331 FALLS ROAD WEST
City-State-Zip: BOYNTON BEACH FL 33437

Title SECRETARY
Name GOLDENBERG, TRACEY
Address C/O CAMPBELL PROPERTY
 MANAGEMENT
 3918 VIA POINCIANA DRIVE SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name HOCHHEISER, BARRY
Address 6710 SUN RIVER ROAD
City-State-Zip: BOYNTON BEACH FL 33437

Title 2ND VP
Name FISH, BARBARA
Address C/O CAMPBELL PROPERTY
 MANAGEMENT
 3918 VIA POINCIANA DRIVE SUITE 9
City-State-Zip: LAKE WORTH FL 33467

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: BARRY HOCHHEISER

PRESIDENT

03/17/2019

Electronic Signature of Signing Officer/Director Detail

Date