## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 769836** 

Entity Name: WESTCHESTER COMMUNITY MASTER ASSOCIATION, INC.

FILED
Apr 04, 2024
Secretary of State
6833373471CC

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

C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 103

CORAL SPRINGS, FL 33065

## **Current Mailing Address:**

C/O REALMANAGE P O BOX 803555

DALLAS, TX 75380 US

FEI Number: 59-2420161 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MILBERG KLEIN PL 1300 N FEDERAL HIGHWAY 205

BOCA RATON, FL 33432 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: DAVID KLEIN 04/04/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title VP

Name EDWARDS, CHERYL Name ROSS, CHARLIE

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

 Title
 DIRECTOR
 Title
 PRESIDENT

 Name
 NEWMARK, JANE
 Name
 BOHON, BETH

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title SECRETARY Title VP

Name MILOWE, JOAN Name JADD, DENISE

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name ALLAN, DAVID

Address

Name ALLAN, DAVID

11784 WEST SAMPLE ROAD SUITE

C/O REALMANAGE

103

City-State-Zip: CORAL SPRINGS FL 33065

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: BETH BOHON PRESIDENT 04/04/2024