

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001141

Entity Name: ANDOVER L CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**289 ANDOVER L
WEST PALM BEACH, FL 33417**Current Mailing Address:**ANDOVER L C/O SEACREST SERVICES, INC.
2400 CENTREPARK W DR. SUITE #175
WEST PALM BEACH, FL 33417 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NELDER, LINDA
289 ANDOVER L
WEST PALM BEACH, FL 33417 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:** LINDA NELDER (KR)

02/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WHEELER, VERNETTE
Address 221 CHANDLER CRESCENT
City-State-Zip: PETERBOROUGH K9J-OH3

Title SECRETARY
Name BASSERMAN, ETHEL
Address 300 HYMUS BLVD
 #240
City-State-Zip: POINTE CLAIRE H9R-6G3

Title ASST. SECRETARY
Name CARRON, BARBARA
Address 291 ANDOVER L
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER
Name NELDER, LINDA
Address 289 ANDOVER L
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name EIFF, MARYELLEN
Address 295 ANDOVER L
City-State-Zip: WEST PALM BEACH FL 33417

Title VP
Name KANSAS, THOMAS
Address 143 ROGERS RD.
City-State-Zip: KITTERY ME 03904

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: VERNETTE WHEELER

PRESIDENT

02/16/2018

Electronic Signature of Signing Officer/Director Detail

Date