

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001141

Entity Name: ANDOVER L CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**295 ANDOVER L
WEST PALM BEACH, FL 33417**Current Mailing Address:**ANDOVER L C/O SEACREST SERVICES, INC.
2101 CENTREPARK W DR. SUITE #110
WEST PALM BEACH, FL 33409 US**FEI Number:** 59-2387415**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EIFF, MARYELLEN
295 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:** MARYELLEN EIFF

06/21/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	HALBERSTAM, SINAI
Address	286 ANDOVER L
City-State-Zip:	WEST PALM BEACH FL 33417

Title	SECRETARY
Name	FOGEL, LEWIS
Address	879 HARVARD
City-State-Zip:	LAVAL QUEBEC H7W 3P8

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

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

Title	DIRECTOR
Name	WHEELER, VERNETTE
Address	287 ANDOVER L
City-State-Zip:	WEST PALM BEACH FL 33417

Title	DIRECTOR
Name	SCHWARTZ, ERIKA
Address	285 ANDOVER L
City-State-Zip:	WEST PALM BEACH FL 33417

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: MARYELLEN EIFF, SL

PRESIDENT

06/21/2023

Electronic Signature of Signing Officer/Director Detail

Date