

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006031

**Entity Name:** CASA ROYALE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1818 S. AUSTRALIAN AVE.,  
SUITE 400  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

C/O ASSOCIATED PROPERTY MANAGEMENT  
8135 LAKE WORTH ROAD SUITE B  
LAKE WORTH, FL 33467 US

**FEI Number:** 54-2154425

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STOLOFF & MANOFF, P.A  
C/O SCOTT STOLOFF  
1818 S. AUSTRALIAN AVE., 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:** SCOTT STOLOFF, ESQ

04/12/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEWIS, VICTORIA  
Address        C/O ASSOCIATED PROPERTY  
                  MANAGEMENT  
                  8135 LAKE WORTH ROAD SUITE B  
City-State-Zip: LAKE WORTH FL 33467

Title            VP  
Name            IZZO, CHRISTOPHER  
Address        C/O ASSOCIATED PROPERTY  
                  MANAGEMENT  
                  8135 LAKE WORTH ROAD SUITE B  
City-State-Zip: LAKE WORTH FL 33467

Title            SECRETARY  
Name            TORRES, NATASIA  
Address        C/O ASSOCIATED PROPERTY  
                  MANAGEMENT  
                  8135 LAKE WORTH ROAD SUITE B  
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:** VICTORIA LEWIS

PRESIDENT

04/12/2022

Electronic Signature of Signing Officer/Director Detail

Date