

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007291

**FILED**  
**Apr 24, 2015**  
**Secretary of State**  
**CC4986746949**

**Entity Name:** OLIVERA AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**Current Mailing Address:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**FEI Number: 65-1146542**

**Certificate of Status Desired: Yes**

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

CARROLL, KEVIN M  
C/O LANG MANAGEMENT  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 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: KEVIN M CARROLL**

**04/24/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name WEINGARTEN, ALLAN  
Address 136 OLIVERA WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name ALPER, TINA  
Address 116 OLIVERA WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title S  
Name KAVASMANECK, ABAN  
Address 134 OLIVERA WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP  
Name KRASKER, GERALD  
Address 125 OLIVERA WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title T  
Name FISHER, JAN  
Address 122 OLIVERA WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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: TINA ALPER**

**DIRECTOR**

**04/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date