

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008219

Entity Name: TOSCANA WEST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3720 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487**Current Mailing Address:**3720 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487**FEI Number: 06-1637333****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RANDALL K. ROGER & ASSOCIATES, P.A.
621 NW 53 ST STE 300
BOCA RATON, FL 33487 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SATSKY, BARTON
Address 3720 S OCEAN BLVD #1510
City-State-Zip: HIGHLAND BEACH FL 33487

Title VP, DIRECTOR
Name BORITZER, JOE
Address 3720 S OCEAN BLVD #501
City-State-Zip: HIGHLAND BEACH FL 33487

Title SECRETARY
Name HALPERN, JOEL
Address 3720 S. OCEAN BLVD #207
City-State-Zip: HIGHLAND BEACH FL 33487

Title DIRECTOR
Name SMITH, PIERCE
Address 3720 S. OCEAN BLVD.
#1404
City-State-Zip: HIGHLAND BEACH FL 33487

Title TREASURER
Name PINTO, NESS
Address 3720 S. OCEAN BLVD
#1508
City-State-Zip: HIGHLAND BEACH FL 33487

Title DIRECTOR
Name BUCKLER, WENDY
Address 3720 S. OCEAN BLVD
#1003
City-State-Zip: HIGHLAND BEACH FL 33487

Title DIRECTOR
Name PERLOW, JANE
Address 3720 S. OCEAN BLVD
#710
City-State-Zip: HIGHLAND BEACH FL 33487

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: JOEL HALPERN**SECRETARY****01/16/2020**

Electronic Signature of Signing Officer/Director Detail

Date