

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N01000008605

**Entity Name:** BLACK DIAMOND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10261 OLD HAMMOCK WAY  
WELLINTGON, FL 33414

**Current Mailing Address:**

BLACK DIAMOND HOA -SEACREST SERVICES,INC.  
10261 OLD HAMMOCK WAY  
WELLINGTON, FL 33414 US

**FEI Number:** 01-0677882

**Certificate of Status Desired:** No

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

FRANK-WEINBERG- BLACK, PL  
7805 S.W. 6TH COURT  
PLANTATION , FL 33324 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:** FRANK-WEINBERG- BLACK

**06/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DEMARCO, JOHN  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            VP  
Name            CHESSMAN, NOEL  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            2ND VP  
Name            CEDENO, ATHENA  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            TREASURER  
Name            BRAMBLE, PHILIP  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            SECRETARY  
Name            PORTNOY, ELI  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            DIRECTOR  
Name            STEVENS, CHRISTOPHER  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

Title            DIRECTOR  
Name            GARCIA, DONNAMARIE  
Address        10261 OLD HAMMOCK WAY  
City-State-Zip: WELLINGTON FL 33414

*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:** JOHN DEMARCO

**PRESIDENT**

**06/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date