

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01565

FILED
Apr 02, 2019
Secretary of State
5758830101CC

Entity Name: COVES AT ABERDEEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O CAPITAL REALTY ADVISORS, INC.
600 SANDTREE DRIVE, SUITE 109
PALM BEACH GARDENS, FL 33403

Current Mailing Address:

C/O CAPITAL REALTY ADVISORS, INC.
600 SANDTREE DRIVE, SUITE 109
PALM BEACH GARDENS, FL 33403 US

FEI Number: 59-2641942

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF J.M. CUNHA
601 HERITAGE DR
SUITE #424
JUPITER, FL 33458 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: J.M. CUNHA

04/02/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name LOUZIN, ALAN
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title SEC
Name GARFUNKEL, FRAN
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title P
Name CHUZI, PAUL
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title VP
Name BURTON, STUART
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title D
Name GRAZIOSO, BOB
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title D
Name WESTFAL, ROBERT
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

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: PAUL CHUZI

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04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date