

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01565

FILED
Jan 13, 2015
Secretary of State
CC9924438632

Entity Name: COVES AT ABERDEEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
LAKE WORTH, FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
LAKE WORTH, FL 33463 US

FEI Number: 59-2641942

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH CHADROW & LEVINE P.A.
1900 N. COMMERCE PKWY
WESTON, FL 33326 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 VP
Name LOUZIN, ALAN
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title SEC
Name KEEGAN, YVETTE
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title P
Name ROMANO, ROSE
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name WILLIG, ROBERT
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title D
Name TOBACK, JOESEPH
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER
Name CIOPPA, ROBERT
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name GRAZIOSO, BOB
Address C/O GRS MANAGEMENT ASSOCIATION, INC.
3900 WOODLAKE BLVD, STE 309
City-State-Zip: LAKE WORTH FL 33463

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: ROSE ROMANO

PRESIDENT

01/13/2015

Electronic Signature of Signing Officer/Director Detail

_____ Date