DOCUMENT# N02000004838
Entity Name: PALM BEACH PLANTATION HOMEOWNERS ASSOCIATION, INC.
Current Principal Place of Business:

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

8751 PALM BEACH PLANTATION BLVD. ROYAL PALM BEACH, FL 33411

Current Mailing Address:

8751 PALM BEACH PLANTATION BLVD. ROYAL PALM BEACH, FL 33411 US

FEI Number: 05-0522097

Name and Address of Current Registered Agent:

SCOTT HYMAN, ESQ. SCOTT HYMAN, ESQ. 1 W. LAS OLAS BLVD., STE. 500 FORT LAUDERDALE, FL 33301 US Certificate of Status Desired: No

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:		02/20/2024					
Electronic Signature of Registered Agent				Date			
Officer/Director Detail :							
Title	PRESIDENT	Title	SECRETARY				

litle	PRESIDENT	litle	SECRETARY
Name	LEVERETTE, JUDSON	Name	STAVISKY, FRANCINE
Address	8751 PALM BEACH PLANTATION BLVD.	Address	8751 PALM BEACH PLANTATION BLVD.
City-State-Zip:	ROYAL PALM BEACH FL 33411	City-State-Zip:	ROYAL PALM BEACH FL 33411
Title	VP	Title	DIRECTOR
Name	DAMELIO, WILLIAM	Name	EAGLE, JEFF
Address	8751 PALM BEACH PLANTATION BLVD.	Address	8751 PALM BEACH PLANTATION BLVD.
City-State-Zip:	ROYAL PALM BEACH FL 33411	City-State-Zip:	ROYAL PALM BEACH FL 33411
Title	TREASURER	Title	DIRECTOR
Name	SZYMANSKI, TAMMY	Name	FRESHWATER, MICHAEL
Address	8751 PALM BEACH PLANTATION BLVD.	Address	8751 PALM BEACH PLANTATION BLVD.
City-State-Zip:	ROYAL PALM BEACH FL 33411	City-State-Zip:	ROYAL PALM BEACH FL 33411
Title	DIRECTOR	Title	DIRECTOR
Name	RICCIO, MICHAEL	Name	GUTIERREZ, RAFAEL
Address	8751 PALM BEACH PLANTATION	Address	265 MULBERRY GROVE ROAD
City-State-Zip:	BLVD. ROYAL PALM BEACH FL 33411	City-State-Zip:	ROYAL PALM BEACH FL 33411
ony-oraie-zip.			

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: JUDSON LEVERETTE

PRESIDENT

02/20/2024

Electronic Signature of Signing Officer/Director Detail

FILED Feb 20, 2024 Secretary of State 7838232968CC