## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006853

Entity Name: THE TUSCANY OF PALM BEACH CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

3570 SOUTH OCEAN BOULEVARD SOUTH PALM BEACH, FL 33480

**Current Mailing Address:** 

C/O CAMPBELL PROPERTY MGMT 401 MAPLEWOOD DR., STE 23 JUPITER, FL 33458 US

FEI Number: 22-3878029 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 625 NORTH FLAGLER DRIVE -7TH FLOOR WEST PALM BEACH, FL 33401 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

FILED Feb 24, 2020

Secretary of State

2887319906CC

Officer/Director Detail:

Title VP Title DIRECTOR

Name ADAMS, ANN MARGARET Name MUSSON, HILLARY

Address C/O CAMPBELL PROPERTY MGMT Address C/O CAMPBELL PROPERTY MGMT

401 MAPLEWOOD DR., STE 23 401 MAPLEWOOD DR., STE 23

City-State-Zip: JUPITER FL 33458 City-State-Zip: JUPITER FL 33458

Title D Title D

Name FREEDMAN, GERALD Name WEISS, ELLEN

Address C/O CAMPBELL PROPERTY MGMT Address C/O CAMPBELL PROPERTY MGMT

401 MAPLEWOOD DR., STE 23 401 MAPLEWOOD DR., STE 23

City-State-Zip: JUPITER FL 33458 City-State-Zip: JUPITER FL 33458

Title SECRETARY Title TREASURER

Name REDMOND, DAVE Name UNRINE, FRANCES

Address C/O CAMPBELL PROPERTY MGMT Address C/O CAMPBELL PROPERTY MGMT

401 MAPLEWOOD DR., STE 23 401 MAPLEWOOD DR., STE 23

City-State-Zip: JUPITER FL 33458 City-State-Zip: JUPITER FL 33458

Title PRESIDENT
Name WANICKA, DON

Address C/O CAMPBELL PROPERTY MGMT

401 MAPLEWOOD DR., STE 23

City-State-Zip: JUPITER FL 33458

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: DON WANICKA PRESIDENT 02/24/2020