

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02825

Entity Name: SAND DRIFT VILLAS HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 12, 2022
Secretary of State
4323571081CC

Current Principal Place of Business:

1818 S. AUSTRALIAN AVE.,
SUITE 400
WEST PALM BEACH, FL 33409

Current Mailing Address:

C/O ASSOCIATED PROPERTY MANAGEMENT
8135 LAKE WORTH RD., SUITE B
LAKE WORTH, FL 33467 US

FEI Number: 59-2408504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOLOFF & MANOFF, P.A.
STOLOFF AND MANOFF, P.A.
1818 S. AUSTRALIAN AVE, SUITE 400
WEST PALM BEACH , FL 33409 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: STOLLOFF

04/12/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name THOMPSON, JOHN "JACK"
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name ROSENBERG, DAVID
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title TRASURER
Name CUTLER , RICAHRD
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name SOLOFF, CHARLES
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GUTTMAN, ROY
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name ROSENBERG, STANLEY
Address 8135 LAKE WORTH ROAD
 B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name COKER, DWAYNE
Address 8135 LAKE WORTH ROAD
 STE B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name ASHER, JAMES
Address C/O ASSOCIATED PROPERTY
 MANAGEMENT
 8135 LAKE WORTH RD., SUITE B
City-State-Zip: LAKE WORTH FL 33467

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: DAVID ROSENBERG

SECRETARY

04/12/2022

Electronic Signature of Signing Officer/Director Detail

Date