

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02989

FILED
Mar 07, 2018
Secretary of State
CC3429348514**Entity Name:** ESPLANADA AT BOCA POINTE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1215 E. HILLSBORO BLVD.
C/O CAMPBELL PROPERTY MANAGEMENT
DEERFIELD BEACH, FL 33441**Current Mailing Address:**1215 E. HILLSBORO BLVD.
C/O CAMPBELL PROPERTY MANAGEMENT
DEERFIELD BEACH, FL 33441 US**FEI Number:** 59-2646234**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHNER, LARRY E
SACHS SAX CAPLAN, P.L.
6111 BROKEN SOUND PARKWAY NW SUITE 200
BOCA RATON, FL 33487 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:** LARRY E. SCHNER

03/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	GOLDEN, ROBERT
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	VICE PRESIDENT
Name	WEISBERG, GENE
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	SECRETARY
Name	DRANDOFF, STEVE
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	TREASURER
Name	CARPENTERI, AMY
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	DIRECTOR
Name	SCINICARIELLO, RALPH
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	DIRECTOR
Name	WINDHEIM, BARBARA
Address	1215 E. HILLSBORO BLVD. C/O CAMPBELL PROPERTY MANAGEMENT
City-State-Zip:	DEERFIELD BEACH FL 33441

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: ROBERT GOLDEN

PRESIDENT

03/07/2018

Electronic Signature of Signing Officer/Director Detail

Date