## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03025

Entity Name: EXECUTIVE WEST OFFICE CONDOMINIUM ASSOCIATION, INC.

**FILED** Mar 07, 2023 **Secretary of State** 1862640439CC

## **Current Principal Place of Business:**

2815 W. NEW HAVEN AVE.

SUITE 202

MELBOURNE, FL 32904

## **Current Mailing Address:**

C/O MAURICE ARCADIER 2815 WEST NEW HAVEN AVE STE304 MELBOURNE, FL 32904 US

FEI Number: 34-2065165 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ODOM, DAN C 2815 WEST NEW HAVEN AVENUE SUITE 202 WEST MELBOURNE, FL 32904 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

Officer/Director Detail:

Title Title TD

Name ODOM, DAN C. Name SVYATNNENKO, MARINA

2815 W NEW HAVEN AVE 2815 WEST NEW HAVEN AVE Address Address

SUITE 202 STE 304

City-State-Zip: W MELBOURNE FL 32904 City-State-Zip: WEST MELBOURNE FL 32904

Title PΠ Title SD

Name ARCADIER, MAURICE Name GILBERT, SHAWN Address 2815 W NEW HAVEN AVE 304 Address 2815 W. NEW HAVEN

SUITE 302 WEST MELBOURNE FL 32904

City-State-Zip: City-State-Zip: MELBOURNE FL 32904

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.

03/07/2023 SIGNATURE: MAURICE ARCADIER PD

Date