

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03067

**Entity Name:** TURNPIKE COMMERCIAL PLAZA, PHASE II, CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 29, 2022**  
**Secretary of State**  
**9945158046CC**

**Current Principal Place of Business:**

1791 BLOUNT RD.  
#902  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

C/O ANTHONY B. COLEMAN JR. PA  
2151 W. HILLSBORO BLVD. STE. 206  
DEERFIELD BEACH, FL 33442 US

**FEI Number: 59-2515088**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TRIPP SCOTT  
110 SE 6 ST  
15TH FLOOR  
FORT LAUDERDALE, FL 33301 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

**Officer/Director Detail :**

Title PD  
Name CELENSKI, BRIAN  
Address 1791 BLOUNT RD. #903  
City-State-Zip: POMPANO BEACH FL 33069

Title VP  
Name VANHEDEN, PAUL  
Address 1791 BLOUNT RD. #1005  
City-State-Zip: POMPANO BEACH FL 33069

Title TD  
Name MINKA, PETER  
Address 1791 BLOUNT ROAD #811  
City-State-Zip: POMPANO BEACH FL 33069

Title ASD  
Name MOSCA, LARRY  
Address 1791 BLOUNT RD #609  
City-State-Zip: POMPANO BEACH FL 33069

Title SD  
Name WALDRON, MARTIN  
Address 1791 BLOUNT RD. #910  
City-State-Zip: POMPANO BEACH FL 33069

*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: PETER MINKA**

**TD**

**03/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date