

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006822

**Entity Name:** 8190 JOG ROAD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

600 SANDTREE DRIVE  
SUITE 109  
PALM BEACH GARDENS, FL 33403

**Current Mailing Address:**

C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
PALM BEACH GARDENS, FL 33403

**FEI Number:** 20-1384586

**Certificate of Status Desired:** No

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

CAPITAL REALTY ADVISORS, INC.  
C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
PALM BEACH GARDENS, FL 33403 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:** DONNA MCDONALD

02/11/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S/T  
Name SHAPIRO, CRAIG DR.  
Address 8190 JOG ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

Title VP  
Name TANEY, BARRY DR.  
Address 8190 JOG ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

Title D  
Name HESCHELES, CRAIG DR.  
Address 8190 JOG ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

Title D  
Name DARLING, STEVEN DR.  
Address 8190 JOG ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

Title P  
Name QUINONEZ, GERARDO DR.  
Address 8190 JOG ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

*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:** CRAIG SHAPIRO

PRESIDENT

02/11/2021

Electronic Signature of Signing Officer/Director Detail

Date