

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

DOCUMENT# N05000000865

**Entity Name:** VALENCIA POINTE MASTER ASSOCIATION, INC.**Current Principal Place of Business:**12270 SW 3RD STREET, SUITE 200  
PLANTATION, FL 33325**Current Mailing Address:**12270 SW 3RD STREET, SUITE 200  
PLANTATION, FL 33325**FEI Number:** 20-2236224**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASSOCIATED CORPORATE SERVICES, LLC  
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:** LOUIS CAPLAN, ESQUIRE

03/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	GELVEN, ARTHUR
Address	6791 SHAMROCK TRAIL
City-State-Zip:	BOYNTON BEACH FL 33437

Title	1VP
Name	KANE , ALLEN
Address	7048 CORNING CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	TREASURER
Name	SHARLET, JAMES
Address	7378 GREENPORT COVE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	2VP
Name	MELTZ, STEVEN
Address	6945 WATERTOWN DRIVE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	SECRETARY
Name	WITTCOFF, HAROLD
Address	10624 RICHFIELD WAY
City-State-Zip:	BOYNTON BEACH FL 33437

Title	ASST. SECRETARY
Name	SPELLMAN, SUSAN
Address	10615 CONWAY TRAIL
City-State-Zip:	BOYNTON BEACH FL 33437

Title	ASST. TREASURER
Name	WOLFBERG, STEVEN
Address	10829 GREEN VALLEY WALK
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:** ARTHUR GELVEN

PRESIDENT

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date