

2018 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:**RUBIN, MARCI
8930 W. STATE ROAD 84, #127
DAVIE, FL 33324 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:** RUBIN MARCI

02/23/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GELVEN, ART
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 2VP
Name HERTZBERG, HOWARD
Address 10912 DEER PARK LANE
City-State-Zip: BOYNTON BEACH FL 33437

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

Title ASST. TREASURER
Name JAFFE, EDWARD
Address 7046 GREAT FALLS CIRCLE
City-State-Zip: BOYNTON BEACH FL 33437

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

Title ASST. SECRETARY
Name WITTCOFF, HAROLD
Address 10624 RICHFIELD WAY
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: ART GELVEN

PRESIDENT

02/23/2018

Electronic Signature of Signing Officer/Director Detail

Date