

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001996

Entity Name: MONTCLAIRE ESTATES COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**C/O ASSOCIATION SPECIALTY GROUP LLC
902 CLINT MOORE ROAD SUITE 110
BOCA RATON, FL 33487**Current Mailing Address:**C/O ASSOCIATION SPECIALTY GROUP LLC
902 CLINT MOORE ROAD SUITE 110
BOCA RATON, FL 33487 US**FEI Number:** 20-2480915**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MICHAEL BENDER, P.A
C/O MICHAEL BENDER, P.A
1200 PARK CENTRAL BLVD. SOUTH
POMPANO BEACH, FL 33064 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:** BENDER, MICHAEL

04/29/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name CAPEZZA, JOSEPH
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 902 CLINT MOORE ROAD SUITE 110
City-State-Zip: BOCA RATON FL 33487

Title VP
Name CATANZARO, BRUCE
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 902 CLINT MOORE ROAD SUITE 110
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name DASCANIO, PETER
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 902 CLINT MOORE ROAD SUITE 110
City-State-Zip: BOCA RATON FL 33487

Title PRESIDENT
Name LYNCH, WILLIAM
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 902 CLINT MOORE ROAD SUITE 110
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name BLISS, CAROLINE
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 902 CLINT MOORE ROAD SUITE 110
City-State-Zip: BOCA RATON FL 33487

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: LYNCH , WILLIAM

PRESIDENT

04/29/2017

Electronic Signature of Signing Officer/Director Detail

Date