# Entity Name: DANIA BEACH BUSINESS ADDRESS CONDOMINIUM ASSOCIATION, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

5901 S.W. 44TH STREET DAVIE, FL 33314

### **Current Mailing Address:**

DOCUMENT# N0600004393

5901 S.W. 44TH STREET DAVIE, FL 33314

## FEI Number: 20-5038161

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

JOHNSON., KIMBERLY T 5901 S.W. 44 STREET DAVIE, FL 33314 US

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

| Title           | DP                                  | Title           | DS/T                  |
|-----------------|-------------------------------------|-----------------|-----------------------|
| Name            | TOMECEK, RONALD L                   | Name            | JOHNSON, KIMBERLY T   |
| Address         | 5901 S.W. 44TH STREET               | Address         | 5901 S.W. 44TH STREET |
| City-State-Zip: | DAVIE FL 33314                      | City-State-Zip: | DAVIE FL 33314        |
|                 |                                     |                 |                       |
| Title           | D                                   |                 |                       |
| Name            | RYAN, KEN                           |                 |                       |
| Address         | 611 PHIPPEN-WAITERS RD.<br>UNIT 102 |                 |                       |
| City-State-Zip: | DANIA BEACH FL 33004                |                 |                       |

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: KIMBERLY T JOHNSON

VP

Date

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 06, 2024 Secretary of State 0890667026CC