

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005932

Entity Name: WESTON 55 PLUS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

16102 EMERALD ESTATES DRIVE
WESTON, FL 33331

FILED
Apr 24, 2024
Secretary of State
9924338460CC

Current Mailing Address:

C/O CASTLE GROUP
12270 SW 3RD STREET #200
PLANTATION, FL 33325 US

FEI Number: 20-5939144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, DE LA TORRE, MARS & SOBEL
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: SIEGFRIED, RIVERA, HYMAN, DE LA TORRE, MARS AND SOBEL 04/24/2024
Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title: PRESIDENT
Name: SENTER, AL
Address: 16102 EMERALD ESTATES DR. #401
City-State-Zip: WESTON FL 33331

Title: VP
Name: MENA, TANIA
Address: 16101 EMERALD ESTATES DR. #239
City-State-Zip: WESTON FL 33331

Title: SECRETARY
Name: SASSE, MARGE
Address: 16135 EMERALD ESTATES DR. #168
City-State-Zip: WESTON FL 33331

Title: DIRECTOR
Name: PEARLMAN, CHARLIE
Address: 16102 EMERALD ESTATES DR. #411
City-State-Zip: WESTON FL 33331

Title: TREASURER
Name: KRON, RICHARD
Address: 16107 EMERALD ESTATES DR.
City-State-Zip: WESTON FL 33331

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: AL SENTER PRESIDENT 04/24/2024
Electronic Signature of Signing Officer/Director Detail Date