

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009726

**Entity Name:** MILLENNIUM COVE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Feb 13, 2024**  
**Secretary of State**  
**8938333707CC**

**Current Principal Place of Business:**

C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE 103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

C/O REALMANAGE  
P O BOX 803555  
DALLAS, TX 75380 US

**FEI Number: 90-0338031**

**Certificate of Status Desired: No**

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

APPLETON REISS LAW FIRM  
215 N HOWARD AVE  
SUITE 200  
TAMPA, FL 33606 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: KEITH SKOREWICZ, ESQ.**

**02/13/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name PEREZ, ANDREW  
Address C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE  
103  
City-State-Zip: CORAL SPRINGS FL 33065

Title PRESIDENT  
Name HILLSLEY, SHANE  
Address C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE  
103  
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER  
Name BUONICONTI, VINCENT  
Address C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE  
103  
City-State-Zip: CORAL SPRINGS FL 33065

Title VP  
Name WALLEN, DREW  
Address C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE  
103  
City-State-Zip: CORAL SPRINGS FL 33065

*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: SHANE HILLSLEY**

**PRESIDENT**

**02/13/2024**

Electronic Signature of Signing Officer/Director Detail

Date