

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012272

Entity Name: EL MAR ASSOCIATION BEACH CLUB, INC.**Current Principal Place of Business:**1396 SOUTH OCEAN BOULEVARD
LAUDERDALE BY THE SEA, FL 33062**Current Mailing Address:**P.O. BOX 10163
POMPANO BEACH, FL 33061**FEI Number:** 20-5995876**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZIPPAY, CATHERINE W
1401 UNIVERSITY DRIVE, SUITE 301
CORAL SPRINGS, FL 33071 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	MR.
Name	PERMENTER, JACK
Address	P.O. BOX 10163
City-State-Zip:	POMBANO BEACH FL 33061

Title	TREASURER
Name	GREEN, SANDRA
Address	P.O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33061

Title	DIRECTOR
Name	CLARK, CHARLES
Address	P. O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33061

Title	SECRETARY
Name	WASHINSKY, BILL
Address	P. O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33061

Title	DIRECTOR
Name	LOPEZ, ANDRES
Address	P. O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33061

Title	DIRECTOR
Name	VITOLLO, WILLIAM
Address	P. O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33062

Title	DIRECTOR
Name	FINN, STEVEN
Address	P. O. BOX 10163
City-State-Zip:	POMPANO BEACH FL 33061

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: SANDRA GREEN**TREASURER****03/14/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date