

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001989

Entity Name: COASTAL WINDS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**801 N. RIVERSIDE DRIVE
POMPANO BEACH, FL 33062**Current Mailing Address:**C/O ACCOUNTING EDGE AND MANAGEMENT
8400 N UNIVERSITY DRIVE 216
TAMARAC, FL 33321 US**FEI Number:** 27-2254380**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ACCOUNTING EDGE AND MANAGEMENT CORP
C/O ACCOUNTING EDGE AND MANAGEMENT
8400 N UNIVERSITY DRIVE 216
TAMARAC, FL 33321 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:** HAROLD HERNANDEZ

04/28/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name CATARUO, WILLIAM
Address C/O ACCOUNTING EDGE AND
MANAGEMENT
8400 N UNIVERSITY DRIVE 216
City-State-Zip: TAMARAC FL 33321

Title TREASURER
Name BEAL, PENNY
Address C/O ACCOUNTING EDGE AND
MANAGEMENT
8400 N UNIVERSITY DRIVE 216
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name SMITH, STERLING
Address C/O ACCOUNTING EDGE AND
MANAGEMENT
8400 N UNIVERSITY DRIVE 216
City-State-Zip: TAMARAC FL 33321

Title PRESIDENT
Name OLIVIER, NORMA
Address C/O ACCOUNTING EDGE AND
MANAGEMENT
8400 N UNIVERSITY DRIVE 216
City-State-Zip: TAMARAC FL 33321

Title VP
Name DOYON, JEAN-CHARLES
Address C/O ACCOUNTING EDGE AND
MANAGEMENT
8400 N UNIVERSITY DRIVE 216
City-State-Zip: TAMARAC FL 33321

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: NORMA OLIVIER

PRESIDENT

04/28/2023

Electronic Signature of Signing Officer/Director Detail

Date