

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011761

Entity Name: PARADISE GARDENS SECTION III PROPERTY OWNERS' ASSOCIATION, INC.**FILED**
Feb 14, 2022
Secretary of State
9668329893CC**Current Principal Place of Business:**C/O BENCHMARK PROPERTY MANAGEMENT
7932 WILES ROAD
CORAL SPRINGS, FL 33067**Current Mailing Address:**C/O BENCHMARK PROPERTY MANAGMENT
7932 WILES ROAD
CORAL SPRINGS, FL 33067 US**FEI Number: 30-0751127****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KAYE BENDER REMBAUM
1200 PARK CENTRAL BLVD. SOUTH
POMPANO BEACH, FL 33064 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: ROBERT KAYE****02/14/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|---------------------|
| Title | P |
| Name | SANCHEZ, ELSA |
| Address | 6930 NW 15TH STREET |
| City-State-Zip: | MARGATE FL 33063 |

| | |
|-----------------|--------------------|
| Title | VP, T |
| Name | HUOT, DANIEL |
| Address | 7010 NW 10TH COURT |
| City-State-Zip: | MARGATE FL 33063 |

| | |
|-----------------|--------------------|
| Title | S |
| Name | BERACHA, LAUREN |
| Address | 6950 NW 14TH PLACE |
| City-State-Zip: | MARGATE FL 33063 |

| | |
|-----------------|----------------------|
| Title | D |
| Name | HAMILTON, GARY |
| Address | 1495 NW 69TH TERRACE |
| City-State-Zip: | MARGATE FL 33063 |

| | |
|-----------------|---------------------|
| Title | D |
| Name | MALDONADO, GILBERT |
| Address | 6975 NW 12TH STREET |
| City-State-Zip: | MARGATE FL 33063 |

| | |
|-----------------|------------------------|
| Title | D |
| Name | MURPHY, ELIZABETH |
| Address | 7932 WILES ROAD |
| City-State-Zip: | CORAL SPRINGS FL 33067 |

| | |
|-----------------|---------------------|
| Title | D |
| Name | NEUHAUS, CRAIG |
| Address | 6950 NW 17TH STREET |
| City-State-Zip: | MARGATE FL 33063 |

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: ELSA SANCHEZ**P****02/14/2022**

Electronic Signature of Signing Officer/Director Detail

Date