

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11778

Entity Name: ASHLAND G. CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 18, 2023
Secretary of State
7835099228CC

Current Principal Place of Business:

C/O WEST BROWARD COMMUNITY MANAGEMENT
820 SOUTH STATE ROAD7
PLANTATION, FL 33317

Current Mailing Address:

C/O WEST BROWARD COMMUNITY MANAGEMENT
820 SOUTH STATE ROAD7
PLANTATION, FL 33317 US

FEI Number: 59-2596681

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARINELLI, CARYNE
15126 ASHLAND ST
#226
DELRAY BEACH, FL 33484 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: CARYNE MARINELLI

03/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TD
Name FERRANTE, SANTE
Address C/O WEST BROWARD COMMUNITY
MANAGEMENT
820 SOUTH STATE ROAD7
City-State-Zip: PLANTATION FL 33317

Title PRESIDENT
Name MARINELLI, CARYNE
Address C/O WEST BROWARD COMMUNITY
MANAGEMENT
820 SOUTH STATE ROAD7
City-State-Zip: PLANTATION FL 33317

Title DIRECTOR
Name MURILLO, TERESA
Address C/O WEST BROWARD COMMUNITY
MANAGEMENT
820 SOUTH STATE ROAD7
City-State-Zip: PLANTATION FL 33317

Title SECRETARY
Name STERN, ALINE
Address C/O WEST BROWARD COMMUNITY
MANAGEMENT
820 SOUTH STATE ROAD7
City-State-Zip: PLANTATION FL 33317

Title VP
Name CAPACCHIONE, LUCIANO
Address C/O WEST BROWARD COMMUNITY
MANAGEMENT
820 SOUTH STATE ROAD7
City-State-Zip: PLANTATION FL 33317

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: CARYNE MARINELLI

PRESIDENT

03/18/2023

Electronic Signature of Signing Officer/Director Detail

Date