## 2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N12492

Entity Name: SOUTH RIVER VILLAGE FIVE CONDOMINIUM ASSOCIATION,

INC.

**Current Principal Place of Business:** 

30 SW SOUTH RIVER DR STUART, FL 34997

**Current Mailing Address:** 

30 SW SOUTH RIVER DR STUART, FL 34997 US

FEI Number: 59-2685780 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 1 EAST BROWARD BLVD., SUITE 1800 FT. LAUDERDALE, FL 33301 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

**FILED** 

Mar 24, 2020

Secretary of State 6035253206CC

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR, ASST. SECRETARY

Name MAGLIOZZI, ORESTE Name KOVERMAN, MIKE

Address 30 SW SOUTH RIVER DRIVE Address 30 SW SOUTH RIVER DRIVE

City-State-Zip: STUART FL 34997 City-State-Zip: STUART FL 34997

Title TREASURER Title VP

Name GARBER, RAY Name SPUHLER, ROBERT

Address 30 SW SOUTH RIVER DRIVE Address 30 SW SOUTH RIVER DRIVE

City-State-Zip: STUART FL 34997 City-State-Zip: STUART FL 34997

Title SECRETARY

Name MULHOLLAND, BETTY
Address 30 SW SOUTH RIVER DR

City-State-Zip: STUART FL 34997

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: ORESTE MAGLIOZZI

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/24/2020