

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000005646

**FILED**  
**May 12, 2020**  
**Secretary of State**  
**5458195066CC**

**Entity Name:** AKOYA AT BOCA WEST COUNTRY CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

20155 BOCA WEST DR  
BOCA RATON, FL 33434

**Current Mailing Address:**

20155 BOCA WEST DR  
BOCA RATON, FL 33434 US

**FEI Number: 83-0640078**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SIEMENS, SCOTT  
520 SE FORT KING STREET,SUITE A-4  
OCALA, FL 34471 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 PD  
Name SIEMENS, SCOTT  
Address 520 SE FORT KING STREET SUITE A-4  
City-State-Zip: Ocala FL 34471

Title S  
Name SPOONER, JAMES  
Address 1148 PARKSIDE CIRCLE N.  
City-State-Zip: BOCA RATON FL 33486

Title VPD  
Name LLORENS, RAMON  
Address 1450 BRICKELL AVENUE SUITE 1450  
City-State-Zip: MIAMI FL 33131

Title VPD  
Name LAMAR, LUIS  
Address 1450 BRICKELL AVENUE SUITE 1450  
City-State-Zip: MIAMI FL 33131

*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: RAMON LLORENS**

**VP**

**05/12/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date