

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18985

Entity Name: THE COLONY AT BREAKERS WEST HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 03, 2019
Secretary of State
2853223177CC**Current Principal Place of Business:**C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467**Current Mailing Address:**C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467 US**FEI Number: 65-0126270****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WARD DAMON POSNER PHETERSON & BLEAU, P.L.
4420 BEACON CIR.
WEST PALM BEACH, FL 33407 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: MICHAEL J POSNER****04/03/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FINK, ROBERT
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name SEMEGRAM, BARRY
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name KIRSCHNER, LEWIS
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name HEALY, MARY
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title VP, TREASURER
Name PAXMAN, JOHN
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GRACE, TERESITA PI
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name AAB, WILLIAM
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

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: MARY HEALY**PRESIDENT****04/03/2019**

Electronic Signature of Signing Officer/Director Detail

Date