

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20017

**Entity Name:** ELYSIUM AT THE ARBORS HOMEOWNERS ASSOCIATION INC.

**FILED**  
**Mar 24, 2023**  
**Secretary of State**  
**9045107432CC**

**Current Principal Place of Business:**

127 ELYSIUM DR  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

127 ELYSIUM DR  
ROYAL PALM BEACH, FL 33411 US

**FEI Number: 65-0062617**

**Certificate of Status Desired: No**

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

SELZ, STEVEN M  
500 UNIVERSITY BLVD  
SUITE 110  
JUPITER, FL 33458 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: STEVEN M SELZ**

**03/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            SICILIA, JOSEPH JR.  
Address        127 ELYSIUM DR  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            SECRETARY  
Name            BOSCA, DAVID  
Address        123 ELYSIUM DR  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            VICE PRESIDENT - DIRECTOR  
Name            FUNARO, GARY  
Address        122 ELYSIUM DR  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            TREASURER, DIRECTOR  
Name            SPRINGER, AVIS  
Address        129 ELYSIUM DRIVE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            DIRECTOR  
Name            PAULD, EVELYNE  
Address        120 ELYSIUM DR.  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            DIRECTOR  
Name            BURCH, JAMES G  
Address        125 ELYSIUM DR.  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            DIRECTOR  
Name            HOPKINS, DENISE  
Address        115 ELYSIUM DR.  
City-State-Zip: ROYAL PALM BEACH FL 33411

*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: AVIS SPRINGER**

**TREASURER**

**03/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date