2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21147

Entity Name: ADIOS VILLAS HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 02, 2015
Secretary of State
CC1026764177

Current Principal Place of Business:

APOGEE ASSOCIATION SERVCIES 3600 S. CONGRESS AVE. SUITE K BOYNTON BEACH, FL 33426

Current Mailing Address:

C/O MYRA LINEAL 3310 NW 71ST STREET COCONUT CREEK, FL 33073 US

FEI Number: 65-0037417 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIRZA BASULTO & ROBBINS, LLP 14160 PALMETTO FRONTAGE RD STE 22 MIAMI LAKES, FL 33016 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 PRESIDENT Title VP

Name LINEAL, MYRA Name MATTIOLI, CARLYN

Address APOGEE ASSOCIATION SERVCIES Address APOGEE ASSOCIATION SERVCIES

3600 S. CONGRESS AVE. SUITE K 3600 S. CONGRESS AVE. SUITE K

City-State-Zip: BOYNTON BEACH FL 33426 City-State-Zip: BOYNTON BEACH FL 33426

Title SECRETARY Title TREASURER

Name RUSSELL, ROBERT Name LIVINGTON, GILBERT

Address APOGEE ASSOCIATION SERVCIES Address APOGEE ASSOCIATION SERVCIES

3600 S. CONGRESS AVE. SUITE K 3600 S. CONGRESS AVE. SUITE K

City-State-Zip: BOYNTON BEACH FL 33426 City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR Title DIRECTOR

Name KREIMEYER, TAMMY Name KING, CATHY

Address APOGEE ASSOCIATION SERVCIES Address APOGEE ASSOCIATION SERVCIES

3600 S. CONGRESS AVE. SUITE K 3600 S. CONGRESS AVE. SUITE K

City-State-Zip: BOYNTON BEACH FL 33426 City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR

Name ROTH, MEREDITH PIPER

Address APOGEE ASSOCIATION SERVCIES

3600 S. CONGRESS AVE. SUITE K

City-State-Zip: BOYNTON BEACH FL 33426

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: LINEAL, MYRA PRESIDENT 04/02/2015