

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24497

FILED
Feb 12, 2017
Secretary of State
CC8001938319

Entity Name: MARINA TOWNHOMES NEIGHBORHOOD HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2389 TREASURE ISLE. DR.
PALM BCH., GARDEN, FL 33410

Current Mailing Address:

7260 WEST OAKLAND PARK BLVD
LAUDERHILL, FL 33313 US

FEI Number: 65-0054016

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, PA
1818 AUSTRALIAN AVE.SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 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
Name APICELLA, ART
Address 2439 TREASURE ISLE DRIVE, #01
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name ROSENBERG, ARNIE
Address 2379 TREASURE ISLE DR. #A06
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name TUMAN, DIANE
Address 2300 TREASURE ISLE DR # A76
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name WAGNER, JAMES
Address 2320 TREASURE ISLE DR # A83
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP, SECRETARY
Name CROUCH, ROBERT
Address 2439 TREASURE ISLE DRIVE
 A 05
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER
Name DEW , ROBBIE
Address 2359 TREASURE ISLE DRIVE
 A-33
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name BYRUM, JEFF
Address 2379 TREASURE ISLE DRIVE
 A-25
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name MENDOZA, ERNIE
Address 2359 TREASURE ISLE DRIVE # A32
City-State-Zip: PALM BEACH GARDENS FL 33410

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: ART APICELLA

PRESIDENT

02/12/2017

Electronic Signature of Signing Officer/Director Detail

Date