

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24699

Entity Name: PLANTATION PALMS ASSOCIATION, INC.**Current Principal Place of Business:**J&L PROPERTY MGMT INC
10191 W SAMPLE RD STE 203
CORAL SPRINGS, FL 33065**Current Mailing Address:**J&L PROPERTY MGMT INC
10191 W SAMPLE RD STE 203
CORAL SPRINGS, FL 33065 US**FEI Number:** 65-0093178**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES CALDERAZZO
J&L PROPERTY MGMT
10191 W SAMPLE RD STE 203
CORAL SPRINGS, FL 33065 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 WALKER, ARLINE
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER
Name WOLFSON, ADRIENNE
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name MALVIN, JEFF
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRING FL 33065

Title DIRECTOR
Name SNYDER, SHAWN
Address J & L PROPERTY MGMT INC
 10191 W SAMPLE RD 203
City-State-Zip: CORAL SPRINGS FL 33065

Title VP
Name BENKENDORF, STUART
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRINGS FL 33065

Title SECRETARY
Name WALSH, THOMAS
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name KARSH, JEFFREY
Address 10191 W SAMPLE RD
 203
City-State-Zip: CORAL SPRINGS FL 33065

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: ARLINE WALKER

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02/14/2024

Electronic Signature of Signing Officer/Director Detail_____
Date