

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25059

Entity Name: BARKLEY MASTER ASSOCIATION, INC.**Current Principal Place of Business:**BARKLEY RECREATIONAL CENTER
2605 BARKLEY DRIVE
WEST PALM BEACH, FL 33415**Current Mailing Address:**C/O SEACREST SERVICES, INC.
2101 CENTREPARK W DR, SUITE 110
WEST PALM BEACH, FL 33409 US**FEI Number:** 65-0040497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVENUE 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:** SCOTT STOLOFF

03/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name SWOPE, MICHAEL
Address 2703 BARKLEY DRIVE EAST
APT. I
City-State-Zip: WEST PALM BEACH FL 33415

Title PRESIDENT
Name PAGE, MICHELLE
Address 5023 CRESTHAVEN BLVD
APT D
City-State-Zip: WEST PALM BEACH FL 33415

Title TREASURER
Name HEXTELL, DAVID
Address 2600 BARKLEY DR. EAST
APT. J
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR
Name TELEGADAS, CHRIS
Address 2640 BARKLEY DRIVE EAST
APT. E
City-State-Zip: WEST PALM BEACH FL 33415

Title VP / DIRECTOR
Name NACCARI, JOHN
Address 5283 CRESTHAVEN BLVD.
APT.B
City-State-Zip: WEST PALM BEACH FL 33415

Title D
Name BOURGEOIS, DENISE
Address 5063 CRESTHAVEN BOULEVARD
APT F
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR
Name COLLIN, ROGER
Address 2621 BARKLEY DRIVE WEST
APT. D
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR
Name FLYNN, PAUL
Address 5423 CRESTHAVEN BLVD.
APT. A
City-State-Zip: WEST PALM BEACH FL 33415

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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: MICHELLE PAGE

PRESIDENT

03/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LOPEZ, RAFAEL
Address	2531 BARKLEY DRIVE WEST APT B
City-State-Zip:	WEST PALM BEACH FL 33415