

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29488

**FILED**  
**Mar 17, 2020**  
**Secretary of State**  
**5536517943CC**

**Entity Name:** MONTEREY ON THE LAKE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
LAKE WORTH, FL 33463

**Current Mailing Address:**

C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
LAKE WORTH, FL 33463 US

**FEI Number: 65-0120498**

**Certificate of Status Desired: No**

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

WASSERSTEIN, DANIEL ESQ.  
301 YAMATO ROAD  
SUITE 2199  
BOCA RATON, FL 33431 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: DANIEL WASSERSTEIN**

**03/17/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name COHAN, MICHAEL  
Address C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT  
Name BARNETT, MICHAEL W  
Address C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title VP  
Name SIEGBERT, CAROLYN  
Address C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER  
Name TRZASKO, CHERYL  
Address C/O GRS MANAGEMENT ASSOC  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

*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: MICHAEL BARNETT**

**PRESIDENT**

**03/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date