

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

DOCUMENT# N32415

**Entity Name:** CACHE' HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O TRANSCONTINENTAL PROPERTY MGMT.  
1323 LYONS ROAD  
COCONUT CREEK, FL 33063**Current Mailing Address:**C/O TRANSCONTINENTAL PROPERTY MGMT.  
1323 LYONS ROAD  
COCONUT CREEK, FL 33063 US**FEI Number:** 65-0180370**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRANSCONTINENTAL PROPERTY MGMT. INC.  
C/O TRANSCONTINENTAL PROPERTY MGMT.  
1323 LYONS ROAD  
COCONUT CREEK, FL 33063 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:** THOMAS MESSER

02/25/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name TUCHETTE, LEE  
Address 8779 FOREST HILLS BLVD  
City-State-Zip: CORAL SPRINGS FL 33065

Title PRESIDENT  
Name COHEN, LISA  
Address 8777 FOREST HILLS BLVD.  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name CANAS, LEONEL  
Address 8737 FOREST HILLS BLVD.  
City-State-Zip: CORAL SPRINGS FL 33065

Title VP  
Name MARTY, JENNIFER  
Address 8787 FOREST HILLS BLVD.  
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER  
Name HATUEL, SOLLY  
Address 8751 FOREST HILLS BLVD.  
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:** LISA COHEN

PRESIDENT

02/25/2020

Electronic Signature of Signing Officer/Director Detail

Date