

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32637

**Entity Name:** BANYAN ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MIAMI MANAGEMENT INC.  
1145 SAWGRASS CORP. PKY  
SUNRISE, FL 33323

**Current Mailing Address:**

1145 SAWGRASS CORP  
SUNRISE, FL 33323 US

**FEI Number:** 65-0196511

**Certificate of Status Desired:** No

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

LEWIS, ARTHUR E ESQ  
BECKER POLIACOFF & FOELSTER, P.A.  
400 SOUTH DIXIE HWY 420  
BOCA RATON, FL 33432 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 P  
Name FEISTHAMMEL, DALE  
Address 1145 SAWGRASS CORP PKWY  
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR  
Name MORGAN, LAURIE  
Address C/O MIAMI MANAGEMENT INC.  
1145 SAWGRASS CORP. PKY  
City-State-Zip: SUNRISE FL 33323

Title TREASURER  
Name RAMOS, SUHEIDY  
Address C/O MIAMI MANAGEMENT INC.  
1145 SAWGRASS CORP. PKY  
City-State-Zip: SUNRISE FL 33323

*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:** DALE FEISTHAMMEL

**PRESIDENT**

**01/09/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date