

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40998

Entity Name: VILLA PLATI HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 11, 2017
Secretary of State
CC8363818602

Current Principal Place of Business:

1037 STATE ROAD 7
SUITE 302
WELLINGTON, FL 33414

Current Mailing Address:

1037 STATE ROAD 7
SUITE 302
WELLINGTON, FL 33414 US

FEI Number: 65-0500529

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAMSON, LAWRENCE
1860 FOREST HILL BLVD
WEST PALM BEACH, FL 33406 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 VP, DIRECTOR
Name IRELAND, JAMES
Address 304 ATLANTICE AVE #4
City-State-Zip: PALM BEACH FL 33480

Title S
Name ABRAMSON, RUTH
Address 305 EVERGLADES AVENUE
City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR
Name HOLLADAY, WALLACE JR.
Address 230 BRADLEY PLACE
City-State-Zip: PALM BEACH FL 33480

Title PRESIDENT, TREASURER, DIRECTOR
Name FINGOLD, DAVID
Address 303 EVERGLADES AVE
City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR
Name STOOPLER, JULIAN
Address 236 BRADLEY PLACE #7
City-State-Zip: PALM BEACH FL 33480

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: DAVID FINGOLD

PRESIDENT

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date