

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44045

**FILED**  
**Feb 09, 2024**  
**Secretary of State**  
**7079064659CC**

**Entity Name:** PROVIDENCIA PARK NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1201 NORTH FLAGLER DRIVE  
W PALM BEACH, FL 33401

**Current Mailing Address:**

1201 NORTH FLAGLER DRIVE  
W PALM BEACH, FL 33401

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

MAYANS, STEVEN A.  
1201 NORTH FLAGLER DRIVE  
W PALM BEACH, FL 33401 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: STEVEN A. MAYANS**

**02/09/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            MAYANS, STEVEN A  
Address        1201 NORTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP, DIRECTOR  
Name            PETER, CONN  
Address        242 NINTH STREET  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            FARMER, MICHELLE  
Address        1209 NORTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR, SECRETARY  
Name            JOHN, LOUDON  
Address        251 NINTH STREET  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            JOHN, WAGNER DR.  
Address        1111 NORTH FLAGLER DRIVE  
City-State-Zip: W PALM BEACH FL 33401

Title            TREASURER, DIRECTOR  
Name            ANTHONY, SIBILIA  
Address        233 EIGHTH STREET  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            TURIN, ELENA  
Address        253 EIGHTH STREET  
City-State-Zip: WEST PALM BEACH FL 33401

*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: STEVEN A. MAYANS**

**PRESIDENT**

**02/09/2024**

Electronic Signature of Signing Officer/Director Detail

Date