

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N46867

Entity Name: THE OMEGA RECREATION COUNCIL, INC.

Current Principal Place of Business:

7200 NW 17 STREET
PLANTATION, FL 33313

Current Mailing Address:

PO BOX 19439
PLANTATION, FL 33318 US

FEI Number: 65-0402617

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD, SUITE C207
FORT LAUDERDALE, FL 33312 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: CHARLES F. OTTO, ESQ.

09/09/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name BEAUCHENE, LINDA
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title D
Name MCGILLIVRAY, HEATHER
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title D
Name CLEOPHAT, JOUBERT
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title D
Name JASSO, TOMAS
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title PRESIDENT, DIRECTOR
Name JIMINEZ, HERMAN
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title VP, DIRECTOR
Name WARREN, ROBERT
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title D
Name KALISH, MARTIN
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title D
Name DEBBIE, CARMICHAEL
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

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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: JIMINEZ , HERMAN

PRESIDENT

09/09/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER, SECRETARY, DIRECTOR
Name LEMOS, SANDRA
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name GOLDENBURG, JEFFREY
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name MOUNIR, MIKE
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name GANGOO, RONALD
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name LEWIN, NATALIE
Address C/O ALLIANCE PROPERTY SYSTEMS
 PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name PACETTI, WILMA
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name JORGE, DANIEL
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name HOOKER, TERRY
Address PO BOX 19439
City-State-Zip: PLANTATION FL 33318