

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49544

Entity Name: DEVON CONDOMINIUM G ASSOCIATION, INC.**Current Principal Place of Business:**PHOENIX MANAGEMENT SERVICES, INC.
7682 NORTH NOB HILL ROAD
TAMARAC, FL 33321**Current Mailing Address:**PHOENIX MANAGEMENT SERVICES, INC.
7682 NORTH NOB HILL ROAD
TAMARAC, FL 33321 US**FEI Number:** 65-0351433**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERS & PETERS, P.A. ATTORNEYS AT LAW
10400 GRIFFIN ROAD
SUITE 108
COOPER CITY, FL 33328 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:** KEVIN G. PETERS, ESQ.

01/13/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	LEVIN, LOUISE
Address	PHOENIX MANAGEMENT SERVICES, INC. 7682 NORTH NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	VP
Name	GOLDSTEIN, RENEE
Address	PHOENIX MANAGEMENT SERVICES, INC. 7682 NORTH NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	TREASURER
Name	ALTMAN, PATRICIA
Address	PHOENIX MANAGEMENT SERVICES, INC. 7682 NORTH NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	PRESIDENT
Name	KAPLAN, ROBERTA
Address	PHOENIX MANAGEMENT SERVICES, INC. 7682 NORTH NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

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: ROBERTA KAPLAN

PRESIDENT

01/13/2021

Electronic Signature of Signing Officer/Director Detail

Date