## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003010

Entity Name: VILLAS AT THE HAMMOCKS CONDOMINIUM ASSOCIATION,

INC.

Apr 12, 2023 Secretary of State 1270725921CC

**FILED** 

## **Current Principal Place of Business:**

FIRSTSERVICE RESIDENTIAL 5200 BLUE LAGOON DRIVE 1000 MIAMI, FL 33126

## **Current Mailing Address:**

FIRSTSERVICE RESIDENTIAL 5200 BLUE LAGOON 1000 MIAMI, FL 33126 US

FEI Number: 65-0348927 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BREITNER, PAUL D 200 S. BISCAYNE BLVD. STE 1800 MIAMI, FL 33131 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: PAUL BREITNER 04/12/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name KEARNS, DONALD Name DESIMONE, MARY

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

5200 BLUE LAGOON DRIVE 1000 5200 BLUE LAGOON DRIVE 1000

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title TREASURER Title SECRETARY

Name BLANCO, XIOMARA Name NICOLSON-LYEW SANG, BEVERLY

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

5200 BLUE LAGOON DRIVE 1000 5200 BLUE LAGOON DRIVE 1000

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title DIRECTOR

Name NURSE, FREDERICK

Address FIRSTSERVICE RESIDENTIAL

5200 BLUE LAGOON DRIVE 1000

City-State-Zip: MIAMI FL 33126

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: DONALD KEARNS

PROPERTY MANAGER

04/12/2023