

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000003756

**Entity Name:** VINTAGE OAKS PROPERTY OWNERS' ASSOCIATION, INC.

**FILED**  
**Jun 24, 2020**  
**Secretary of State**  
**6024394622CC**

**Current Principal Place of Business:**

790 PARK OF COMMERCE BLVD  
STE 200  
BOCA RATON, FL 33487

**Current Mailing Address:**

790 PARK OF COMMERCE BLVD  
STE 200  
BOCA RATON, FL 33487 US

**FEI Number: 65-0583690**

**Certificate of Status Desired: Yes**

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

CARROLL, KEVIN M  
790 PARK OF COMMERCE BLVD  
STE 200  
BOCA RATON, FL 33487 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 CARROLL**

**06/24/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           COHEN, ARNOLD  
Address        5533 VINTAGE OAKS CIRCLE  
City-State-Zip: DELRAY BEACH FL 33484

Title           VP  
Name           SALL, ADAM  
Address        5983 VINTAGE OAKS CIRCLE  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           BARI, MYRON  
Address        5662 VINTAGE OAKS CIRCLE  
City-State-Zip: DELRAY BEACH FL 33484

Title           SECRETARY  
Name           TRATTNER, LISA  
Address        5784 VINTAGE OAKS CIRCLE  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           ABRAMS, ALLAN  
Address        5855 VINTAGE OAKS CIRCLE  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           LEFFERTS, EVAN  
Address        5526 VINTAGE OAKS TERR  
City-State-Zip: DELRAY BEACH FL 33484

Title           PRESIDENT  
Name           MAKOWSKY, STEVEN  
Address        5633 VINTAGE OAKS LN  
City-State-Zip: DELRAY BEACH FL 33484

*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 MAKOWSKY**

**PRESIDENT**

**06/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date