## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005711

Entity Name: SOUNDINGS HOMEOWNERS' ASSOCIATION AT RIVER

BRIDGE, INC.

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

4000 S 57TH AVE SUITE 101 LAKE WORTH, FL 33463

## **Current Mailing Address:**

PROPERTY MANAGEMENT RESOURCES 4000 S 57TH AVE SUITE 101 LAKE WORTH, FL 33463 US

FEI Number: 65-0610168 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A. 1818 AUSTRAILIAN AVENUE SOUTH, SUITE 400 WEST PALM BEACH, FL 33409 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:

Electronic Signature of Registered Agent

Date

**FILED** Feb 21, 2018

**Secretary of State** 

CC7998721851

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** 

Name NAZARIAN-NIK, SHAHIN Name MCLEOD, RODERICK

Address 4000 S 57TH AVE SUITE 101 Address 4000 S 57TH AVE SUITE 101

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

VΡ Title Title **SECRETARY** 

Name CARABETTA, ANNA Name SARLEY, KATIA

Address 4000 S 57TH AVE SUITE 101 Address 4000 S 57TH AVE SUITE 101 LAKE WORTH FL 33463 City-State-Zip: City-State-Zip: LAKE WORTH FL 33463

Title

Name CLINE, CAROL ANN

Address 4000 S 57TH AVE SUITE 101 City-State-Zip: LAKE WORTH FL 33463

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: SHAHIN NAZARIAN-NIK

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/21/2018