

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000005711

**FILED**  
**Mar 15, 2023**  
**Secretary of State**  
**4740088538CC**

**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 AUSTRALIAN 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            NAZARIAN-NIK, SHAHIN  
Address        4000 S 57TH AVE SUITE 101  
City-State-Zip: LAKE WORTH FL 33463

Title            VP  
Name            SARLEY , KATIA  
Address        4000 S 57TH AVE SUITE 101  
City-State-Zip: LAKE WORTH FL 33463

Title            SECRETARY  
Name            GARCIA, NOHELY  
Address        4000 S. 57TH BLVD  
                 SUITE 101  
City-State-Zip: LAKE WORTH FL 33463

Title            TREASURER  
Name            SHAW, CHARLES  
Address        4000 S. 57TH BLVD  
                 SUITE 101  
City-State-Zip: LAKE WORTH FL 33463

Title            DIRECTOR  
Name            HARRIS, ROGER  
Address        4000 S. 57TH AVENUE  
                 SUITE 101  
City-State-Zip: LAKE WORTH FL 33463

Title            DIRECTOR  
Name            DRISCOL, CHARLES  
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**

**PRESIDENT**

**03/15/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date