

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002748

Entity Name: DORCHESTER G CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1617 N LAKESIDE DRIVE
LAKE WORTH, FL 33460**Current Mailing Address:**PO BOX 16096
WEST PALM BEACH, FL 33416 US**FEI Number:** 59-1637962**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALLAGHER, PHILIP
1617 N LAKESIDE DRIVE
LAKE WORTH, FL 33460 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:** PHILIP GALLAGHER

06/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MILLER, HARVEY
Address 164 DORCHESTER G
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT
Name FILIPPELLI, FRANK
Address 158 DORCHESTER G
City-State-Zip: 158 DORCHESTER G FL 33417

Title DIRECTOR
Name MELNIK, MARYANN
Address 141 DORCHESTER G
City-State-Zip: WEST PALM BEACH FL 33417

Title VP
Name NANKERVIS, GRACE
Address 162 DORCHESTER G
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name FULTON, DEBRA
Address 1617 N LAKESIDE DRIVE
City-State-Zip: LAKE WORTH FL 33460

Title SECRETARY
Name SALAZAR, LUISA
Address 161 DORCHESTER G
City-State-Zip: WEST PALM BEACH FL 33417

Title VP
Name LORENZO, MERCEDES
Address 150 DORCHESTER G
City-State-Zip: WEST PALM BEACH FL 33417

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: HARVEY MILLER

TRES

06/16/2021

Electronic Signature of Signing Officer/Director Detail

Date