

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000435

Entity Name: THE MOORINGS PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101
MIAMI, FL 33131**Current Mailing Address:**C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101
MIAMI, FL 33131 US**FEI Number:** 65-0718693**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASSOCIATION LAW GROUP, P.L.
ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101
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:** STEVE STECKLER

01/31/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name PANJABI, KIRAN
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title VP, DIRECTOR
Name TORNEK, LAWRENCE
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title VP, DIRECTOR
Name DENARO, COURTNEY
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title SECRETARY, DIRECTOR
Name CORRAL, SILVIA
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title VP, DIRECTOR
Name SAIGAL-SHAH, JUHI
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title ASST. TREASURER, DIRECTOR
Name ADAMS, TIM
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title TREASURER, DIRECTOR
Name HOLZMAN, KAREN
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

Title ASST. SECRETARY, DIRECTOR
Name BONTAS, JENNIFER
Address C/O ASSOCIATION LAW GROUP, P.L.
1101 BRICKELL AVENUE SUITE N1101

City-State-Zip: MIAMI FL 33131

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: KIRAN PANJABI

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01/31/2023

