

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006010

Entity Name: NORWICH M CONDO ASSOCIATION, INC.**Current Principal Place of Business:**2427 EAST 29TH STREET #3L
BROOKLYN, NY 11235**Current Mailing Address:**312 NORWICH M
WEST PALM BEACH, FL 33417 US**FEI Number:** 59-2350901**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUEVARA, GARY
312 NORWICH M
WEST PALM BEACH, FL 33417 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 CO-PRESIDENT
Name GLASS, DIANA
Address 2427 E 29TH STREET
3L
City-State-Zip: BROOLYN NY 11235

Title CO-TREASURER
Name GUEVARA, GARY
Address 312 NORWICH M
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name ZANNELLI, SANDRA
Address 294 NORWICH M
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY
Name GLADU, JANE
Address 68 SOMERSET D
City-State-Zip: WEST PALM BEACH FL 33417

Title CO-TREASURER, CO-PRESIDENT
Name SCHIANO, ELENA
Address 491 E HINGVILLE BLVD
City-State-Zip: STATEN ISLAND NY 10312

Title DIRECTOR
Name BENTLEY, SUE
Address 289 NORWICH M
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name DOMINGUEZ, ANGEL
Address 307 NORWICH M
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: DIANA GLASS BY GALE TERRELL, SEACREST**PRESIDENT****03/10/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date