

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000532

FILED
Apr 28, 2021
Secretary of State
4073739215CC

Entity Name: MIZNER'S PRESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD7 SUITE 219
BOCA RATON, FL 33498

Current Mailing Address:

SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD7 SUITE 219
BOCA RATON, FL 33498 US

FEI Number: 65-1046463

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPLAN, LOUIS
C/O SACHS, SAX, CAPLAN
6111 BROKEN SOUND PARKWAY NW, SUITE200
BOCA RATON, FL 33487 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 SALAMON, IRA
Address 6364 D'ORSAY CT
City-State-Zip: DELRAY BEACH FL 33484

Title VP
Name STOPEK, RICHARD
Address 6311 VIA VENETIA N
City-State-Zip: DELRAY BEACH FL 33484

Title S
Name KAYAL, JENNIFER
Address 6060 VIA VENETIA S
City-State-Zip: BOCA RATON FL 33484

Title TREASURER
Name YOUNG, JAMES
Address 16420 VIA VENETIA E
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name RUSSO, ROBERT
Address 6080 VIA VENETIA S
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name COHEN, JUDY
Address 6032 VIA VENETIA N
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name SIDELL, MOSS
Address 6241 VIA VENETIA N
City-State-Zip: DELRAY BEACH FL 33484

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: IRA SALAMON

PRESIDENT

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date