

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000007396

**FILED**  
**Feb 25, 2014**  
**Secretary of State**  
**CC8879901076**

**Entity Name:** PALERMO AT VENETIAN ISLES (PARCEL D) HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US

**FEI Number:** 65-0984573

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROUGH, CHADROW & LEVINE, P.A.  
1900 N COMMERCE PKWY  
WESTON, FL 33326 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           TREASURER  
Name           TANCREDI, JOSEPH  
Address        8837 VIA TUSCANY DR.  
City-State-Zip: BOYNTON BEACH FL 33472

Title           2VP  
Name           HART, STEVEN  
Address        8942 VIA TUSCANY DR  
City-State-Zip: BOYNTON BEACH FL 33472

Title           P  
Name           KESSLEN, SHELDON  
Address        8812 VIA TUSCANY DR  
City-State-Zip: BOYNTON BEACH FL 33472

Title           S  
Name           HERMAN, EILEEN  
Address        8970 VIA TUSCANY  
City-State-Zip: BOYNTON BEACH FL 33472

Title           1VP  
Name           SCARNA, PAUL  
Address        8954 VIA TUSCANY DRIVE  
City-State-Zip: BOYNTON BEACH FL 33472

*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:** SHELDON KESSLEN

**PRESIDENT**

**02/25/2014**

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

\_\_\_\_\_  
Date