

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000084706

Entity Name: CORNWALL PROPERTIES, INC.**Current Principal Place of Business:**1801 S FEDERAL HWY
BOCA RATON, FL 33432**Current Mailing Address:**1801 S FEDERAL HWY
BOCA RATON, FL 33432 US**FEI Number:** 59-3411916**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BCRA, LLC
1905 NW CORPORATE BLVD - STE. 310
BOCA RATON, FL 33431 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	PD
Name	ROSEMURGY, KIMBERLY A
Address	1801 SOUTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33432

Title	SD
Name	ROSEMURGY, ALEXANDER S II
Address	1801 SOUTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33432

Title	TD
Name	ROSEMURGY, JAMIE M
Address	1801 SOUTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33432

Title	VP
Name	STEPHANO, RICHARD D
Address	1801 SOUTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33432

Title	VP
Name	DESIATO, NICHOLAS
Address	1801 SOUTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33432

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEXANDER S ROSEMURGY II**MANAGER****02/24/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date