

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715588

**FILED**  
**Apr 24, 2023**  
**Secretary of State**  
**0553019976CC****Entity Name:** DEERFIELD BEACH GARDENS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2091 NE 36TH STREET  
#50373  
LIGHTHOUSE POINT , FL 33074**Current Mailing Address:**PO BOX 50373  
LIGHTHOUSE POINT, FL 33074 US**FEI Number: 59-1286795****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BACKER ABOUD POLIAKOFF & FOELSTER  
400 S DIXIE HWY  
STE 420  
BOCA RATON, FL 33432 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: RYAN POLIAKOFF****04/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR
Name	CUNNINGHAM, SUSAN
Address	PO BOX 50373
City-State-Zip:	LIGHTHOUSE POINT FL 33074

Title	SECRETARY
Name	LINDBLOM, CARL
Address	PO BOX 50373
City-State-Zip:	LIGHTHOUSE POINT FL 33074

Title	P
Name	SHUMAN, ADAM
Address	PO BOX 50373
City-State-Zip:	LIGHTHOUSE POINT FL 33074

Title	VP
Name	SMITH, FREDERIC
Address	PO BOX 50373
City-State-Zip:	LIGHTHOUSE POINT FL 33074

Title	TREASURER
Name	CINELLI, MICHAEL
Address	PO BOX 50373
City-State-Zip:	LIGHTHOUSE POINT FL 33074

*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: ADAM SHUMAN****PRESIDENT****04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date