

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716281

Entity Name: EVERETT ARMS COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**3550 N.W. 8TH AVENUE
POMPANO BEACH, FL 33064**Current Mailing Address:**POST OFFICE BOX 8730
DEERFIELD BEACH, FL 33443-8730 US**FEI Number:** 57-0540136**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RATLIFF, CARY L
700 S.E. 2ND AVENUE, #415
DEERFIELD BEACH, FL 33441 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	D
Name	LOVATT, WILLIAM
Address	3550 NW 8TH AVE STE 702
City-State-Zip:	POMPANO BEACH FL 33064

Title	PRES
Name	MCCOY, SHERMAN R
Address	3550 NW 8TH AVE STE 511
City-State-Zip:	POMPANO BEACH FL 33064

Title	D
Name	RACANELLI, JOHN
Address	3550 NW 8TH AVE STE 416
City-State-Zip:	POMPANO BEACH FL 33064

Title	VP
Name	MAZZONE, JAMES
Address	3082 S. OAKLAND FOREST DR. #1305
City-State-Zip:	OAKLAND PARK FL 33309

Title	D
Name	WHITE, KRISTINE
Address	3550 NW 8TH AVE STE 608
City-State-Zip:	POMPANO BEACH FL 33064

Title	SECRETARY
Name	ALBERTSON, CAROL
Address	3550 NW 8TH AVE STE 106
City-State-Zip:	POMPANO BEACH FL 33064

Title	D
Name	GARGARO, NICOLA
Address	3550 NW 8 AVE., #214
City-State-Zip:	POMPANO BEACH FL 33064

Title	D
Name	SCOZZARI, JOSEPH
Address	3550 N.W. 8TH AVE. #302
City-State-Zip:	POMPANO BEACH FL 33064

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: SHERMAN R. MCCOY**PRES****02/27/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date