

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 716281

**Entity Name:** EVERETT ARMS COMMUNITY 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:** 57-0540136**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHERYL J. LEVIN PA  
4694 NW 103 AVE  
SUNRISE, FL 33313 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:** CHERYL LEVIN

04/24/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name NOTARANDREA, LEONARDO R  
Address PO BOX 50373  
City-State-Zip: LIGHTHOUSE POINT FL 33074

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

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

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

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

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

Title PRESIDENT  
Name SOUZA, RONI  
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:** RONI DE SOUZA

PRESIDENT

04/24/2025

Electronic Signature of Signing Officer/Director Detail

Date