2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727494

Entity Name: COTE D'AZUR CONDOMINIUM ASSOCIATION, INC.

FILED Apr 09, 2024 Secretary of State 4682956270CC

Current Principal Place of Business:

4200 NORTH OCEAN DRIVE

OFFICE TWR-2

SINGER ISLAND, FL 33404

Current Mailing Address:

4200 NORTH OCEAN DRIVE OFFICE TWR-2 SINGER ISLAND, FL 33404

FEI Number: 59-1581528 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER 625 NORTH FLAGLER DRIVE 7TH FLOOR WEST PALM BEACH, FL 33401 BECKER

625 NORTH FLAGLER DRIVE 7 W PALM BEACH, FL 33401 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: MARTY PLATTS 04/09/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title	DIRECTOR	Title	TREASURER
Name	JUDYSKI, PHILIP	Name	EDELSON, ERIC

Address 4200 NORTH OCEAN DR Address 4200 NORTH OCEAN DR

1-306 2-1703

City-State-Zip: SINGER ISLAND FL 33404 City-State-Zip: SINGER ISLAND FL 33404

Title SECRETARY Title DIRECTOR

Name MARKISON, KENNETH Name LEAL, JORGE

Address 4200 NORTH OCEAN DR Address 4200 NORTH OCEAN DR

2-801 2-1204

City-State-Zip: SINGER ISLAND FL 33404 City-State-Zip: SINGER ISLAND FL 33404

 Title
 PRESIDENT
 Title
 VICE-PRESIDENT

 Name
 FOLLARI, FRANK
 Name
 GOR, SERGIO

 Address
 4200 N OCEAN DR
 Address
 4200 N OCEAN DR

2-1205 1-102

City-State-Zip: SINGER ISLAND FL 33404 City-State-Zip: SINGER ISLAND FL 33404

Title GENERAL MANAGER Title DIRECTOR

Name CALHOUN, WILLIAM Name PYMM, WILLIAM

Address 4200 NORTH OCEAN DRIVE Address 4200 N OCEAN DR

TOWER 1 OFFICE 1-1004

City-State-Zip: RIVIERA BEACH FL 33404 City-State-Zip: SINGER ISLAND FL 33404

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: WILLIAM C CALHOUN GENERAL MANAGER 04/09/2024