

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728015

**FILED**  
**Feb 25, 2022**  
**Secretary of State**  
**8376762207CC**

**Entity Name:** THE OLYMPUS ASSOCIATION, INC.

**Current Principal Place of Business:**

500 THREE ISLANDS BLVD.  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

500 THREE ISLANDS BLVD.  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 59-1497116

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BENDER, MICHAEL S  
KAYE BENDER REMBAUM  
1200 PARK CENTRAL BOULEVARD SOUTH  
POMPAÑO BEACH, FL 33064 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:** MICHAEL S BENDER

02/25/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BENNETT, EFTIHIA  
Address 500 THREE ISLANDS BLVD  
City-State-Zip: HALLANDALE BEACH FL 33009

Title PRESIDENT  
Name BELMONTI, BRIAN  
Address 500 THREE ISLANDS BLVD  
City-State-Zip: HALLANDALE FL 33009

Title VP  
Name ARONSON, DAVID  
Address 500 THREE ISLANDS BLVD  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name SZEILER, ZOLTAN  
Address 500 THREE ISLANDS BLVD  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name PINTO, DONATO  
Address 500 THREE ISLANDS BLVD.  
City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY  
Name ORDAZ, ANA  
Address 500 THREE ISLANDS BLVD.  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name KIRILYUK, KIRILL  
Address 500 THREE ISLANDS BLVD.  
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER  
Name DAVIS, RICHARD  
Address 500 THREE ISLANDS BLVD.  
City-State-Zip: HALLANDALE BEACH FL 33009

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*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:** BRIAN BELMONTI

PRESIDENT

02/25/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR

Name PEREZ , TERESA

Address 500 THREE ISLANDS BLVD.

City-State-Zip: HALLANDALE BEACH FL 33009