

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734720

Entity Name: WATER GLADES 200 CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5544 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404-2551**Current Mailing Address:**5544 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404-2551 US**FEI Number:** 59-1632669**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOLLENGARDEN, PETER
1200 PARK CENTRAL BLVD S.
POMPANO 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:** PETER MOLLENGARDEN

03/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name CLARK, FRAN
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title PRESIDENT
Name STEIN, ROBERT
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title VP
Name MACKIEWICZ, TOM
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title DIRECTOR
Name LIEBLER, MARTIN
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title DIRECTOR
Name HEGARTY, TARA
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title DIRECTOR
Name GOMEZ, MANNY
Address 5544 N. OCEAN DR
City-State-Zip: SINGER ISLAND FL 33404

Title DIRECTOR
Name DORFMAN, BONNIE
Address 5544 N. OCEAN DRIVE
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: FRAN CLARK

SECRETARY

03/15/2019

Electronic Signature of Signing Officer/Director Detail

Date