

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737990

Entity Name: ARISTA PARK CONDOMINIUM, INC.**Current Principal Place of Business:**C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025**Current Mailing Address:**C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025 US**FEI Number:** 59-1882170**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONGORA, MICHAEL C.
BECKER & POLIAKOFF
2525 PONCE DE LEON BLVD SUITE 825
CORAL GABLES, FL 33134 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 C. GONGORA

04/15/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	THOMSON, JOHN
Address	C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025

Title	TREASURER
Name	MACPHERSON, KEITH
Address	C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025

Title	SECRETARY
Name	STEPHANIS, ELIZABETH
Address	C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025

Title	PRESIDENT
Name	WEAVER, CONSTANCE
Address	C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025

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: CONSTANCE WEAVER

PRESIDENT

04/15/2025

Electronic Signature of Signing Officer/Director Detail

Date