

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740600

**FILED**  
**Feb 24, 2020**  
**Secretary of State**  
**6788437568CC**

**Entity Name:** STEEPLECHASE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
PALM BEACH GARDENS,, FL 33403

**Current Mailing Address:**

C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
PALM BEACH GARDENS,, FL 33403 US

**FEI Number:** 59-1824597

**Certificate of Status Desired:** No

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

BACHOVE, EVAN  
4440 PGA BLVD  
SUITE 308  
PALM BCH GARDENS, FL 33410 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:** EVAN BACHOVE

02/24/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name KANEL, AMIR  
Address C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
City-State-Zip: PALM BEACH GARDENS, FL 33403

Title TREASURER  
Name KESSMAN, ALAN  
Address C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
City-State-Zip: PALM BEACH GARDENS, FL 33403

Title PRESIDENT  
Name MOORE, DAVID  
Address C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
City-State-Zip: PALM BEACH GARDENS, FL 33403

Title DIRECTOR  
Name HARDY, KEITH  
Address C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
City-State-Zip: PALM BEACH GARDENS, FL 33403

Title SECRETARY  
Name FISHER, CHARLES  
Address C/O CAPITAL REALTY ADVISORS, INC.  
600 SANDTREE DRIVE, SUITE 109  
City-State-Zip: PALM BEACH GARDENS, FL 33403

*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:** DAVID MOORE

PRESIDENT

02/24/2020

Electronic Signature of Signing Officer/Director Detail

Date