

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742054

**FILED**  
**Mar 31, 2023**  
**Secretary of State**  
**3172072243CC**

**Entity Name:** THE PLAZAS MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

5355 TOWN CENTER ROAD,  
SUITE 350  
BOCA RATON, FL 33486

**Current Mailing Address:**

5355 TOWN CENTER ROAD  
102  
BOCA RATON, FL 33486 US

**FEI Number: 59-1892913**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            BIANCO, ANGELO  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

Title            VP  
Name            REESE, BRETT  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

Title            TREASURER, DIRECTOR  
Name            FRANCIS, NADIA  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

Title            SECRETARY, DIRECTOR  
Name            SALOUR, NADER  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

Title            DIRECTOR  
Name            OSBORNE, JOHN  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

Title            DIRECTOR  
Name            WAINWRIGHT, JON  
Address        5355 TOWN CENTER ROAD,  
                  SUITE 350  
City-State-Zip: BOCA RATON FL 33486

*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: ANGELO BIANCO**

**PRESIDENT**

**03/31/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date