### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749439** 

Entity Name: VIA DEL MAR CONDOMINIUM ASSOCIATION, INC.

FILED Apr 27, 2016 Secretary of State CC0524134021

## **Current Principal Place of Business:**

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC 1711 WORTHINGTON RD STE 103 WEST PALM BEACH, FL 33409

### **Current Mailing Address:**

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC 1711 WORTHINGTON RD STE 103 WEST PALM BEACH, FL 33409 US

FEI Number: 59-2139254 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

DICKER KRIVOK & STOLOFF 1818 S AUSTRAILIAN AVE WEST PALM BEACH, FL 33409 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: DICKER 04/27/2016

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Address

TitlePRESIDENTTitleTREASURERNameHOYT, JAMES RNameMUSTARD, JOHN

Address C/O ALLIED PROPERTY Address 1711 WORTHINGTON RD

MANAGEMENT GROUP, INC
1711 WORTHINGTON RD STE 103

City-State-Zip: WEST PALM BEACH FL 33409

City-State-Zip: WEST PALM BEACH FL 33409

Title VP

Title VP Name REED, ROBERT J

Name VERMEULEN, LEN Address C/O ALLIED PROPERTY MANAGEMENT GROUP, INC

C/O ALLIED PROPERTY 1711 WORTHINGTON RD STE 103
MANAGEMENT GROUP, INC

1711 WORTHINGTON RD STE 103 City-State-Zip: WEST PALM BEACH FL 33409

City-State-Zip: WEST PALM BEACH FL 33409 Title TREASURER

Title SECRETARY Name KLINKER, JACQUELINE M
Name RAGUCCI, FRANK Address C/O ALLIED PROPERTY

Address C/O ALLIED PROPERTY MANAGEMENT GROUP, INC

1711 WORTHINGTON RD STE 103

MANAGEMENT GROUP, INC
1711 WORTHINGTON RD STE 103

City-State-Zip: WEST PALM BEACH FL 33409

City-State-Zip: WEST PALM BEACH FL 33409

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: HOYT, JAMES R PRESIDENT 04/27/2016