

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767810

Entity Name: MORNINGSIDE HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**6751 NORTH FEDERAL HIGHWAY
SUITE 200
BOCA RATON, FL 33487**Current Mailing Address:**7491 N FEDERAL HWY
SUITE C5-168
BOCA RATON, FL 33487 US**FEI Number:** 65-0119231**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIDER, DONALD C
6751 NORTH FEDERAL HIGHWAY
SUITE 200
BOCA RATON, FL 33487 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	PDST
Name	SIDER, DONALD
Address	6751 NORTH FEDERAL HIGHWAY
City-State-Zip:	BOCA RATON FL 33487

Title	TD
Name	ANESTA, LENORE
Address	7491 N. FEDERAL HIGHWAY - SUITE C5-168
City-State-Zip:	BOCA RATON FL 33487-1625

Title	DIRECTOR
Name	JURACSIK, TED
Address	7491 N. FEDERAL HIGHWAY - SUITE C5-168
City-State-Zip:	BOCA RATON FL 33487

Title	VP, D
Name	GRECSEK, BONNIE
Address	7491 N. FEDERAL HIGHWAY - SUITE C5-168
City-State-Zip:	BOCA RATON FL 33487

Title	DIRECTOR
Name	FREY, MIMI
Address	7491 N. FEDERAL HIGHWAY - SUITE C5-168
City-State-Zip:	BOCA RATON FL 33487

Title	DIRECTOR
Name	POLERA, DEBRA
Address	7491 N. FEDERAL HIGHWAY - SUITE C5-168
City-State-Zip:	BOCA RATON FL 33487

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: DONALD SIDER**PRESIDENT****01/10/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date