

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00433

**Entity Name:** ANDOVER D OF KINGS POINT CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 01, 2021**  
**Secretary of State**  
**3019899910CC****Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL  
1904 CLUBHOUSE DRIVE  
SUN CITY CENTER, FL 33573**Current Mailing Address:**FIRST SERVICE RESIDENTIAL  
1904 CLUBHOUSE DRIVE  
SUN CITY CENTER, FL 33573 US**FEI Number: 59-2155840****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LAW OFFICE OF JAMES R DE FURIO, PA  
201 E KENNEDY BLVD  
SUITE 775  
TAMPA, FL 33602 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: DEB MALEK****04/01/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY
Name	WAITE, PHILLIP
Address	206 ANDOVER PLACE N #81
City-State-Zip:	SUN CITY CENTER FL 33573

Title	TD
Name	PAGE, DANIEL
Address	206 ANDOVER PLACE N #73
City-State-Zip:	SUN CITY CENTER FL 33573

Title	PRESIDENT
Name	BRADY, THOMAS
Address	70 KENVIL AVENUE
City-State-Zip:	SUCCASUNNA NJ 07876

Title	DIRECTOR
Name	THEBEAU, MARYELLEN
Address	206 ANDOVER PL N APT D-89
City-State-Zip:	SUN CITY CENTER FL 33573

Title	VP
Name	LOWERY-WARREN, PAULA
Address	948 KINGS BLVD
City-State-Zip:	SUN CITY CENTER FL 33573

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: THOMAS BRADY****PRESIDENT****04/01/2021**

Electronic Signature of Signing Officer/Director Detail

Date