

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00681

FILED
Apr 15, 2019
Secretary of State
4471882310CC

Entity Name: COUNTRYPARK AT BOCA RATON HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASSOCIATED PROPERTY MANAGEMENT OF THE PALM BEACHES, INC.
8135 LAKE WORTH RD. SUITE B
LAKE WORTH, FL 33467

Current Mailing Address:

C/O ASSOCIATED PROPERTY MANAGEMENT OF THE PALM BEACHES, INC.
8135 LAKE WORTH RD. SUITE B
LAKE WORTH, FL 33467 US

FEI Number: 59-2373578

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATED PROPERTY MANAGEMENT OF THE PALM BEACHES, INC.
8135 LAKE WORTH RD.,
SUITE B
LAKE WORTH , FL 33467 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: ASSOCIATED PROPERTY MANAGEMENT

04/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ATKINSON, JANICE
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title VICE PRESIDENT
Name LAYE, JON
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name WOROBEY, SCOTT
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name ALEXANDER, MICHAEL
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name MENESES, JOHANN
Address 8135 LAKE WORTH RD.,
 SUITE B
City-State-Zip: LAKE WORTH FL 33467

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: JANICE ATKINSON

PRESIDENT

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date