

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002449

**Entity Name:** MARIPOSA POINTE AT WESTON TOWN CENTER  
CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC6590139194****Current Principal Place of Business:**C/O TROY'S PROPERTY MANAGEMENT GROUP  
2645 EXECUTIVE PARK DRIVE 127  
WESTON, FL 33331**Current Mailing Address:**C/O TROY'S PROPERTY MANAGEMENT GROUP  
2645 EXECUTIVE PARK DRIVE 127  
WESTON, FL 33331 US**FEI Number: 65-1074554****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KATZ, STEVEN ESQ.  
7154 NORTH UNIVERSITY DRIVE  
TAMMARC, FL 33321 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: STEVEN KATZ****04/29/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TD
Name	ROSEN, ERROL
Address	2645 EXECUTIVE PARK DRIVE SUITE 127
City-State-Zip:	WESTON FL 33331

Title	PD
Name	POORMAN, MICHAEL
Address	2645 EXECUTIVE PARK DRIVE SUITE 127
City-State-Zip:	WESTON FL 33331

Title	VPD
Name	WIJTENBURG, MARC
Address	2645 EXECUTIVE PARK DRIVE SUITE 127
City-State-Zip:	WESTON FL 33331

Title	SD
Name	WEINKLE, LAURA
Address	2645 EXECUTIVE PARK DRIVE SUITE 127
City-State-Zip:	WESTON FL 33331

Title	D
Name	POPKIN, DAVID
Address	2645 EXECUTIVE PARK DRIVE SUITE 127
City-State-Zip:	WESTON FL 33331

*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: MICHAEL POORMAN****PRESIDENT****04/29/2016**

Electronic Signature of Signing Officer/Director Detail

Date