

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007344

FILED
Mar 15, 2016
Secretary of State
CC0023339570

Entity Name: VALENCIA SHORES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

7751 VALENCIA SHORES DR
LAKE WORTH, FL 33467

Current Mailing Address:

7751 VALENCIA SHORES DR
LAKE WORTH, FL 33467

FEI Number: 65-1145830

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF PA
ONE EAST BROWARD BLVD., SUITE 1800
FORT LAUDERDALE, FL 33301 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 SECRETARY
Name SILVERMAN, GAIL
Address 8131 SEAHORSE COVE BOULEVARD
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name FEINBERG, ROBERT
Address 8658 TIERRA LAGO COVE
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name GREENBERG, MARK
Address 8154 SANDPIPER GLEN DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name KAPLAN, IRENE
Address 7782 MARQUIS RIDGE LANE
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name MILLER, ROBERT
Address 8283 SEAHORSE COVE BOULEVARD
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name JASNE, STANLEY
Address 7708 CORAL COLONY WAY
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GERMAN, BARRY
Address 7820 BROOKMAR COURT
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name TIBER, STEVEN
Address 7941 SONATA BAY POINT
City-State-Zip: LAKE WORTH FL 33467

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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: IRENE KAPLAN

PRESIDENT

03/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name REITER, ELI
Address 7563 STARFISH REEF LANE
City-State-Zip: LAKE WORTH FL 33467