

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007344

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 US

FEI Number: 65-1145830

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEINBERG, STEVEN A ESQ
7805 SW 6 COURT
PLANTATION, FL 33324 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 DIRECTOR
Name STROLLA, CARMINE
Address 7769 ROYAL CALAIS DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title 2ND VICE PRESIDENT
Name REITER, ELI
Address 7563 STARFISH REEF LANE
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name ISACOFF, ERIC
Address 8193 SANDPIPER GLEN DR
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name ROMANOFF, RICHARD
Address 7567 PEBBLE SHORES TERRACE
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name PORTNER, SAUL
Address 8659 TIERRA LAGO COVE
City-State-Zip: LAKE WORTH FL 33467

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

Title SECRETARY
Name STALL SMITH, SHELLI
Address 7913 SEA POINT WAY
City-State-Zip: LAKE WORTH FL 33467

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

Continues on page 2

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: ERIC ISACOFF

PRESIDENT

02/05/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BLICKMAN, LAWRENCE
Address 7909 SEAGRAPE SHORES DRIVE
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name KLABANOFF, MICHAEL
Address 8176 ABALONE POINT BLVD
City-State-Zip: LAKE WORTH FL 33467