

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000009027

**Entity Name:** COCOPLUM PROPERTY OWNERS ASSOCIATION OF PALM BEACH, INC.

**FILED**  
**Mar 31, 2022**  
**Secretary of State**  
**0267928209CC**

**Current Principal Place of Business:**

SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410 US

**FEI Number: 90-0109028**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

IGLESIAS LAW GROUP, P.A.  
15800 PINES BLVD, STE 303  
PEMBROKE PINES, FL 33027 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 DOMIGUEZ, FRANCISCO  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY  
Name MANDEL, ERIC  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER  
Name TACCARIELLO, MARIO JR.  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name PARCHMENT, DERRICK  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT  
Name CAMERON, KEVIN  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name AURICH, GUISELLE  
Address SEA BREEZE CMS  
4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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: KEVIN CAMERON**

**PRESIDENT**

**03/31/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date