

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01977

Entity Name: GRENADIER LAKES AT WELLEBY CONDOMINIUM, INC.**Current Principal Place of Business:**

GRENADIER LAKES @ WELLEBY CONDO ASSN.
C/O WEST BROWARD COMMUNITY MANAGEMENT 820 SOUTH STATE ROAD 7
PLANTATION, FL 33317

Current Mailing Address:

GRENADIER LAKES @ WELLEBY CONDO ASSN.
C/O WEST BROWARD COMMUNITY MANAGEMENT 820 SOUTH STATE
ROAD 7
PLANTATION, FL 33317 US

FEI Number: 59-2816763**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

STEVENS & GOLDWYN PA
2 SOUTH UNIVERSITY DRIVE
SUITE 329
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: JOHN STEVENS

03/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PHILLIPS, ANDREW
Address GRENADIER LAKES @ WELLEBY
 CONDO ASSN.
 C/O WEST BROWARD COMMUNITY
 MANAGEMENT 820 SOUTH STATE
 ROAD 7
City-State-Zip: PLANTATION FL 33317

Title TREASURER
Name FRANCO, SANTIAGO
Address GRENADIER LAKES @ WELLEBY
 CONDO ASSN.
 C/O WEST BROWARD COMMUNITY
 MANAGEMENT 820 SOUTH STATE
 ROAD 7
City-State-Zip: PLANTATION FL 33317

Title DIRECTOR
Name ANTONCZYK, ROBERT
Address GRENADIER LAKES @ WELLEBY
 CONSO ASSN
 C/O WEST BROWARD COMMUNITY
 MANAGEMENT 820 S STATE RD 7
City-State-Zip: PLANTATION FL 33317

Title VP
Name TANNENBAUM, KEITH
Address GRENADIER LAKES @ WELLEBY
 CONDO ASSN.
 C/O WEST BROWARD COMMUNITY
 MANAGEMENT 820 SOUTH STATE
 ROAD 7
City-State-Zip: PLANTATION FL 33317

Title SECRETARY
Name ABUGATTAS, JUAN
Address GRENADIER LAKES @ WELLEBY
 CONDO ASSN
 C/O WEST BROWARD COMMUNITY
 MANAGEMENT 820 S STATE RD 7
City-State-Zip: PLANTATION FL 33317

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: ANDREW PHILLIPS

PRESIDENT

03/13/2025

Electronic Signature of Signing Officer/Director Detail

Date