

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009549

FILED
Apr 22, 2025
Secretary of State
6560957385CC**Entity Name:** DREXEL PARK TOWNHOMES 1 CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**GRS COMMUNITY MANAGEMENT
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH, FL 33463**Current Mailing Address:**GRS COMMUNITY MANAGEMENT
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH, FL 33463 US**FEI Number: 01-0840903****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SACH SAX CAPLAN
6111 BROKEN SOUND PKWY
SUITE 200
BOCA RATON, FL 33487 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:** LOUIS CAPLAN

04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	FRIEDSON, MARC
Address	3900 WOODLAKE BLVD SUITE 306
City-State-Zip:	LAKE WORTH FL 33463

Title	VP
Name	TAUB, STU
Address	3900 WOODLAKE BLVD SUITE 309
City-State-Zip:	LAKE WORTH FL 33463

Title	TREASURER
Name	OBRYANT , PATRICK
Address	3900 WOODLAKE BLVD SUITE 309
City-State-Zip:	LAKE WORTH FL 33463

Title	SECRETARY
Name	WOHL, NATALIE
Address	3900 WOODLAKE BLVD 309
City-State-Zip:	LAKE WORTH FL 33463

Title	DIRECTOR
Name	TIBBS, CHRISTINE
Address	3900 WOODLAKE BLVD 309
City-State-Zip:	LAKE WORTH FL 33463

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: MARC FRIEDSON**PRESIDENT**

04/22/2025

Electronic Signature of Signing Officer/Director Detail

Date