## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008808

Entity Name: CARRINGTON AT COCONUT CREEK CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

4804 N. STATE RD. 7 COCONUT, FL 33073

**Current Mailing Address:** 

4804 N. STATE RD. 7

COCONUT CREEK, FL 33073

FEI Number: 20-3387134 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHENDELL & ASSOCIATES, P.A. 5340 N FEDERAL HWY SUITE 201 LIGHTHOUSE POINT, FL 33064 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

FILED Apr 04, 2016

**Secretary of State** 

CC0383077572

Officer/Director Detail:

Title PRESIDENT Title VP

Name RUDANOVICH, NICHOLAS P Name RYMPALSKI, TODD

Address 4804 N STATE ROAD 7 Address 4804 N. STATE RD. 7

City-State-Zip: COCONUT CREEK FL 33373 City-State-Zip: COCONUT CREEK FL 33073

Title TREASURER Title SECRETARY

Name ROJAS, FLOR A Name RICKETTS, JANE

Address 4804 N. STATE RD. 7 Address 4804 N. STATE ROAD 7

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR
Name ANSARI, SALIM

Address 4804 N STATE ROAD 7

SIGNATURE: TODD RYMPALSKI

City-State-Zip: COCONUT CREEK FL 33073

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.

Electronic Signature of Signing Officer/Director Detail

VP

04/04/2016 Date