

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007194

Entity Name: CITY WALK AT PINEAPPLE GROVE CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 25, 2016
Secretary of State
CC5133470317**Current Principal Place of Business:**200 SE 2ND AVE
DELRAY BEACH, FL 33444**Current Mailing Address:**401 W. ATLANTIC AVE
SUITE R-12
DELRAY BEACH, FL 33444 US**FEI Number: 56-2597342****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DANON, ROI
401 W. ATLANTIC AVE
SUITE R-12
DELRAY BEACH, FL 33444 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: ROI DANON****04/25/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	PORTEN , SCOTT
Address	401 W. ATLANTIC AVE SUITE R-12
City-State-Zip:	DELRAY BEACH FL 33444

Title	VP
Name	BELLINI, PETER
Address	401 W. ATLANTIC AVE SUITE R-12
City-State-Zip:	DELRAY BEACH FL 33444

Title	PRESIDENT
Name	MERMIGAS, GREGORY
Address	401 W. ATLANTIC AVE SUITE R-12
City-State-Zip:	DELRAY BEACH FL 33444

Title	DIRECTOR
Name	HUBBARD, LINDA
Address	401 W. ATLANTIC AVE SUITE R-12
City-State-Zip:	DELRAY BEACH FL 33444

Title	DIRECTOR
Name	SULLIVAN, ROB
Address	401 W. ATLANTIC AVE SUITE R-12
City-State-Zip:	DELRAY BEACH FL 33444

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: GREGORY MERMIGAS**PRESIDENT****04/25/2016**

Electronic Signature of Signing Officer/Director Detail

Date