

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23697

Entity Name: ANCHOR BAY CLUB CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**300 THREE ISLANDS BLVD.
HALLANDALE, FL 33009-2800**Current Mailing Address:**300 THREE ISLANDS BLVD.
HALLANDALE, FL 33009-2800 US**FEI Number:** 65-0017694**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE, BENDER & REMBAUM
1200 PARK CENTRAL BLVD, SOUTH
POMPANO BEACH, 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:** MICHAEL BENDER

03/03/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LEVINE, IAN
Address 300 THREE ISLANDS BLVD.
 PH 1A
City-State-Zip: HALLANDALE FL 33009-2800

Title DIRECTOR
Name FERRUCCIO, ANTHONY
Address 300 THREE ISLANDS BLVD.
City-State-Zip: HALLANDALE FL 33009-2800

Title DIRECTOR
Name WHITE , THOMAS LESTER
Address 300 THREE ISLANDS BLVD
 219
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name LEWEN, STEPHEN
Address 300 THREE ISLANDS BLVD
City-State-Zip: HALLANDALE CITY FL 33009

Title SECRETARY
Name WU, KUEI KANG
Address 300 THREE ISLANDS BLVD.
 118
City-State-Zip: HALLANDALE FL 33009-2800

Title VP
Name JACOBSON, BENJAMIN
Address 300 THREE ISLANDS BLVD.
City-State-Zip: HALLANDALE FL 33009-2800

Title DIRECTOR
Name FRANCK, DEAN
Address 300 THREE ISLANDS BLVD
City-State-Zip: HALLANDALE BEACH FL 33009

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: WU KUEI KANG**SECRETARY**

03/03/2025

Electronic Signature of Signing Officer/Director Detail

Date