

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35614

Entity Name: PLATINA COMMUNITY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

9640 PLATINA AVE.
BOYNTON BEACH, FL 33437

Current Mailing Address:

9640 PLATINA AVE.
BOYNTON BEACH, FL 33437 US

FEI Number: 65-0169827

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POLAKOFF, RYAN D ESQ.
BACKER ABOUD POLIAKOFF & FOELSTER, LLP
400 S DIXIE HIGHWAY - STE. 420
BOCA RATON, FL 33432 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

Officer/Director Detail :

Title PRESIDENT
Name PERNICK, STUART
Address 5265 BRISATA CIR.
 APT. G
City-State-Zip: BOYNTON BEACH FL 33437

Title SECRETARY
Name MCCARTHY, JAMES
Address 5133 BRISATA CIRCLE
 APT. G
City-State-Zip: BOYNTON BEACH FL 33437

Title TREASURER
Name D'ANGELO, PHYLLIS
Address 5140 FLORIA WAY E
City-State-Zip: BOYNTON BEACH FL 33437

Title DIRECTOR
Name FRANK, STEVE
Address 5188 EUROPA DRIVE
 APT. A
City-State-Zip: BOYNTON BEACH FL 33437

Title SECOND VICE PRESIDENT
Name MACALUSO, SALVATORE
Address 5265 BRISATA CIRCLE
 APT. L
City-State-Zip: BOYNTON BEACH FL 33437

Title DIRECTOR
Name HERZFELD, MIKE
Address 5366 VENETIA COURT
 APT. G
City-State-Zip: BOYNTON BEACH FL 33437

Title FIRST VICE PRESIDENT
Name THOMPSON, BURT
Address 9566 MEDICI LANE
 APT. D
City-State-Zip: BOYNTON BEACH FL 33437

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: STUART PERNICK

PRESIDENT

03/23/2020

Electronic Signature of Signing Officer/Director Detail

Date