

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 197147

**Entity Name:** EVER APRIL APARTMENTS, INC.

**Current Principal Place of Business:**

8 BRINY AVE  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

8 BRINY AVE  
POMPANO BEACH, FL 33062 US

**FEI Number:** 59-0806577

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

JAKAB, JO-ANNE  
EVER APRIL APTS. #406  
8 BRINY AVENUE  
POMPANO BEACH, FL 33062 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:** JO-ANNE JAKAB

03/01/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name HUBER, MARK J  
Address 8 BRINY AVE  
APT 304  
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER  
Name GALVIN, PATRICIA  
Address 8 BRINY AVE  
APT 401  
City-State-Zip: POMPANO BEACH FL 33062

Title PRESIDENT  
Name JAKAB, JO-ANNE  
Address 8 BRINY AVENUE  
406  
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR  
Name JAKAB, GLORIA  
Address 8 BRINY AVE  
504  
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR  
Name JADRNICEK, MICHAEL  
Address 8 BRINY AVE  
204  
City-State-Zip: POMPANO BEACH FL 33062

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA GALVIN

TREASURER

03/01/2023

Electronic Signature of Signing Officer/Director Detail

Date