## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 199727** 

**Entity Name: ALBERTA-BEALE INC** 

**Current Principal Place of Business:** 

90 SE 5TH AVENUE

DELRAY BEACH, FL 33483

**Current Mailing Address:** 

C/O JMA COMMUNITY MANAGEMENT, INC 1375 GATEWAY BLVD BOYNTON BEACH, FL 33426 US

FEI Number: 59-6072981 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

LINDSAY E RAPHAEL, ESQ 1001 W YAMATO RD SUITE 401 BOCA RATON, FL 33431 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: LINDSAY E RAPHAEL 04/24/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

INC

**TREASURER** Title Title **PRESIDENT** 

KELOKATES, MARIA LANA Name Name SHERMAN, ROSLYN

Address C/O JMA COMMUNITY MANAGEMENT, Address C/O JMA COMMUNITY MANAGEMENT,

INC

1375 GATEWAY BLVD

1375 GATEWAY BLVD

City-State-Zip: BOYNTON BEACH FL 33426 City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR Title VΡ

Name BURKE, WALTER Name WRIGHT, JEAN

Address C/O JMA COMMUNITY MANAGEMENT, Address C/O JMA COMMUNITY MANAGEMENT, INC

1375 GATEWAY BLVD 1375 GATEWAY BLVD

BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426 City-State-Zip: City-State-Zip:

Title **SECRETARY** QUILLIAN, LISA Name

Address C/O JMA COMMUNITY MANAGEMENT,

1375 GATEWAY BLVD

BOYNTON BEACH FL 33426 City-State-Zip:

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.

04/24/2023 **PRESIDENT** SIGNATURE: ROSLYN SHERMAN

Electronic Signature of Signing Officer/Director Detail

Date

Date

**FILED** Apr 24, 2023

**Secretary of State** 

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