

**2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 556397

**Entity Name:** CEN-WEST COMMUNITIES, INC.

**FILED**  
**Oct 24, 2023**  
**Secretary of State**  
**7946968939CC**

**Current Principal Place of Business:**

1601 FORUM PLACE  
SUITE 500  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

1601 FORUM PLACE  
SUITE 500  
W PALM BEACH, FL 33401

**FEI Number:** 59-1794084

**Certificate of Status Desired:** No

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

LEVY, MARK F  
1601 FORUM PLACE  
SUITE 500  
WEST PALM BEACH, FL 33401 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 D  
Name PESECKIS, LYNN L  
Address 1601 FORUM PLACE, SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title DP  
Name LEVY, MARK F  
Address 1601 FORUM PLACE, SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP, CFO  
Name WELLS, MONICA  
Address 1601 FORUM PLACE, SUITE 500  
City-State-Zip: WEST PALM BCH. FL 33401

Title VP  
Name MILLINGTON, JUDY  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP, SECRETARY  
Name FRIEDMAN, LAURA  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title COMPTROLLER, TREASURER  
Name WINDLE, TERRI  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name KOFFLER, ABBY  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name LEVY-BIZANES, JOURDAN  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: W PALM BEACH FL 33401

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*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:** MARK F. LEVY

**PRESIDENT**

**10/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name CRUZ, DANIEL  
Address 1601 FORUM PLACE  
SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401