

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739248

Entity Name: BRITTANY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7000 W ATLANTIC AVE
DELRAY BEACH , FL 33446

Current Mailing Address:

8200 NW 41ST ST
SUITE 200
DORAL, FL 33166 US

FEI Number: 59-1756742

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SACHS SAX CAPLAN
6111 BROKEN SOUND PKWY NW #200
BOCA RATON, FL 33487 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: SACHS SAX CAPLAN

01/24/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name RAFAEL, ELIZABETH
Address 8200 NW 41ST ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title VP
Name FEINBERG, ROCHELLE
Address 8200 NW 41ST ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title TREASURER
Name DELARATO, FRANCES
Address 8200 NW 41ST ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title SECRETARY
Name MURPHY, PATRICIA
Address 8200 NW 41 ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name MANCA, DARLENE
Address 8200 NW 41 ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name SUTTON, CHARLES
Address 8200 NW 41 ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name TUCKER, PATRICIA
Address 8200 NW 41 ST
 SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name ISRAEL, RON
Address 8200 NW 41 ST
 SUITE 200
City-State-Zip: DORAL FL 33166

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

SIGNATURE: RAFAEL , ELIZABETH

PRESIDENT

01/24/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KEENAN, JAMES
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name ALVAREZ, RAFAEL
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name WALLEN, ERROL
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name ROGERS, LINDA
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name ROSSI, PATRICIA
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name YOFFE, DOV
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name DELLOSSO, MARIA
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name BORENSTEIN, BENJAMIN
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name SLOMINSKI, EDWARD
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name BANANTO, PAMELA

Title DIRECTOR
Name BANANTO, PAMELA
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name FELDMAN, SUSAN
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name FELDMAN, MICHAEL
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name STEEN, DEBORAH
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name OHLSTEIN, MARSHA
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name FILANCIA, DANIEL
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name FISCHER, JAMES
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name CAVANAUGH, PETER
Address 8200 NW 41 ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name DELONG, DENISE
Address 8200 NW 41ST ST
SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name CONNOLLY, ANNETTE
Address 8200 NW 41ST ST
SUITE 200

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name LOGUIDICE, RITA

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name KRISTAL, ELIZABETH

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name AKS, RONDA

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name CIOFFI, GARY

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name SARRICA, JOHN

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166

Title DIRECTOR

Name PAGLUICA, CARL

Address 8200 NW 41ST ST
SUITE 200

City-State-Zip: DORAL FL 33166