

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718482

**Entity Name:** BREAKERS OF FT. LAUDERDALE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

909 BREAKERS AVE.  
FT.LAUDERDALE, FL 33304

**Current Mailing Address:**

25510 COMMERCENTRE DRIVE  
SUITE #100  
LAKE FOREST, CA 92630 US

**FEI Number: 59-2454526**

**Certificate of Status Desired: No**

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

BAUMAN, DAVID M  
4050 WEST BROWARD BLVD.  
PLANTATION, FL 33317 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: DAVID M BAUMAN**

**06/26/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name FROMER, KENNETH  
Address 909 BREAKERS AVE.  
City-State-Zip: FORT LAUDERDALE FL 33304

Title VPD  
Name WNUKOWSKI, RONALD  
Address 909 BREAKERS AVE.  
City-State-Zip: FORT LAUDERDALE FL 33304

Title SD  
Name MCLEOD, KEITH  
Address 909 BREAKERS AVE.  
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP, DIRECTOR  
Name FROMER, JASON  
Address 909 BREAKERS AVE.  
City-State-Zip: FT.LAUDERDALE FL 33304

Title TD  
Name MIZE, MAX  
Address 909 BREAKERS AVE.  
City-State-Zip: FT.LAUDERDALE FL 33304

*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: KENNETH FROMER**

**PRESIDENT**

**06/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date