

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724246

FILED
Apr 30, 2008
Secretary of State

Entity Name: PLAZA 15 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1600 S.E. 15TH STREET
OFFICE
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

1600 S.E. 15TH STREET
OFFICE
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 59-1496890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIFRONY, MATTHEW ESQ.
110 S.E. 6TH STREET
15TH FLOOR, REPUBLIC TOWER
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PALMER, VALERIE L
Address: 1600 S.E. 15TH STREET #412
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVP () Delete
Name: FERRIS, SUSAN
Address: 1600 S.E. 15TH STREET #308
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DS () Delete
Name: ANDERSON, BRIAN
Address: 1600 S.E. 15TH STREET #509
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DT () Delete
Name: GAHWILER, MARK
Address: 1600 S.E. 15TH STREET #514
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D () Delete
Name: IASBARRONE, DANIEL
Address: 1600 S.E. 15TH STREET #503
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: O'TOOLE, BRUCE
Address: 1600 S.E. 15TH STREET #415
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK GAHWILER

DT

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date