

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003959

FILED
Apr 06, 2012
Secretary of State

Entity Name: ALHAMBRA PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

209 N. BIRCH ROAD
ATTN:FRONT DESK
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

209 N. BIRCH ROAD
ATTN:FRONT DESK
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-1113536 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
3111 STIRLING RD
FORT LAUDERDALE, FL 33312 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: P
Name: NOVICK, JIM
Address: 209 N BIRCH RD, #1102
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: T
Name: STAMATAKIS, MANNY
Address: 209 N BIRCH RD #802
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S
Name: HURY, HANK
Address: 209 N BIRCH RD, #1202
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D
Name: JACKMAN, STEVE
Address: 209 N BIRCH RD#1102
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D
Name: WILTON, MARK
Address: 209 B BIRCH RD #1600
City-St-Zip: FORT 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: JIM NOVICK

P

04/06/2012

Electronic Signature of Signing Officer or Director

Date