

2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 713401

Entity Name: THE FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

333 SUNSET DRIVE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

333 SUNSET DRIVE
FORT LAUDERDALE, FL 33301

FEI Number: 59-1196724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER/POLIAKOFF
625 N. FLAGLER DR, 7TH FLOOR
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 TD
Name CASSEL, WALTER
Address 333 SUNSET DRIVE #903
City-State-Zip: FORT LAUDERDALE FL 33301

Title PD
Name LYNCH, ROBERT
Address 333 SUNSET DRIVE #104
City-State-Zip: FORT LAUDERDALE FL 33301

Title SD
Name WOOD, JAMES
Address 333 SUNSET DRIVE #602
City-State-Zip: FORT LAUDERDALE FL 33301

Title VD
Name ROTH, PATRICIA
Address 333 SUNSET DRIVE #206
City-State-Zip: FORT LAUDERDALE FL 33301

Title D
Name WHETSTONE, LORRAINE
Address 333 SUNSET DRIVE #302
City-State-Zip: FORT LAUDERDALE FL 33301

Title D
Name CHOSED, LES
Address 333 SUNSET DRIVE #501
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name WEITZMAN, NORMAN
Address 333 SUNSET DRIVE
1006
City-State-Zip: FORT LAUDERDALE FL 33301

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: ROBERT LYNCH

PRESIDENT

10/17/2013

Electronic Signature of Signing Officer/Director Detail

Date