

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725355

Entity Name: BIRCH SQUARE ASSOCIATION, INC.**Current Principal Place of Business:**3003 TERRAMAR STREET
FORT LAUDERDALE, FL 33304**Current Mailing Address:**3003 TERRAMAR STREET
FORT LAUDERDALE, FL 33304**FEI Number:** 59-1498101**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, KAREN
3003 TERRAMAR STREET
FORT LAUDERDALE, FL 33304 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:** KAREN JOHNSON

02/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MCMANUS, TOM
Address 3003 TERRAMAR STREET
City-State-Zip: FORT LAUDERDALE FL 33304

Title SECRETARY
Name JOHNSON, KAREN E
Address 3003 TERRAMAR STREET
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name FAUSETT, BRIAN
Address 3003 TERRAMAR STREET
 604
City-State-Zip: FORT LAUDERDALE FL 33304

Title TREASURER
Name NILZEN, GREGER
Address 3003 TERRAMAR STREET
 302
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name SANDA, LOUISE
Address 3003 TERRAMAR STREET
 1201
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name JACOBSON, DAN
Address 3003 TERRAMAR STREET
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name COLE, ANDY
Address 609 BREAKERS AVENUE
 4
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name SANDA, PAR
Address 501 BIRCH ROAD
 1
City-State-Zip: FORT LAUDERDALE FL 33304

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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: KAREN E JOHNSON**SECRETARY AND AGENT** 02/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MUELLER, MARK
Address	3003 TERRAMAR STREET
City-State-Zip:	FORT LAUDERDALE FL 33304