

2018 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:** Yes**Name and Address of Current Registered Agent:**EVELYN BROWN
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:** EVBELYN BROWN

02/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GUILLAUME, PHYLLIS
Address 3003 TERRAMAR STREET
502
City-State-Zip: FORT LAUDERDALE FL 33304

Title SECRETARY
Name SMITH, ROSALIE
Address 3003 TERRAMAR STREET
1005
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name DAHL, KURT
Address 600 N BIRCH ROAD
406
City-State-Zip: FORT LAUDERDALE FL 33304

Title TD
Name LAMPNER, MARTIN
Address 3003 TERRAMAR STREET
904
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name NESBITT, MARYROSE
Address 3003 TERRAMAR STREET
1201
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name GOLDSTEIN, KORI
Address 3003 TERRAMAR STREET
1003
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name MCMANUS, THOMAS
Address 501 N BIRCH ROAD
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name PESCE, DAN
Address 3003 TERRAMAR STREET
903
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: PHYLLIS GUILLAUME

PRESIDENT

02/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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