

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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

08/13/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name D'INNOCENZI, PAUL
Address 600 BIRCH ROAD #405-H
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name JULIUS, JASON
Address 3003 TERRAMAR, 203
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP
Name FARROW, PAUL
Address 3003 TERRAMAR STREET
City-State-Zip: FORT LAUDERDALE FL 33304

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

Title SECRETARY
Name KEINDL, DAVID
Address 3003 TERRAMAR STREET #701
City-State-Zip: FORT LAUDERDALE FL 33304

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

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

Title DIRECTOR
Name HANCOCK, HAROLD
Address 3003 TERRAMAR STREET
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: DAVID KEINDL

SECRETARY

08/13/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|--------------------------|
| Title | DIRECTOR |
| Name | CAMPBELL, BILL |
| Address | 3003 TERRAMAR STREET |
| City-State-Zip: | FORT LAUDERDALE FL 33304 |