

**2017 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:**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

02/24/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name D'INNOCENZI, PAUL  
Address 3003 TERRAMAR STREET  
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR  
Name NEIFFER, ROBERT  
Address 3003 TERRAMAR  
City-State-Zip: FORT LAUDERDALE FL 33304

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

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

Title SECRETARY  
Name DAHL, KURT  
Address 3003 TERRAMAR STREET  
City-State-Zip: FORT LAUDERDALE FL 33304

Title TD  
Name NESBITT, MARYROSE G  
Address 3003 TERRAMAR STREET  
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 GUILLAUME, PHYLLIS  
Address 3003 TERRAMAR STREET  
City-State-Zip: FORT LAUDERDALE FL 33304

**Continues on page 2**

*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:** PAUL D'INNOCENZI**PRESIDENT**

02/24/2017

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