

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732920

FILED
Jan 17, 2017
Secretary of State
CC7886375884

Entity Name: PARK PLACE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1350 SAINT CHARLES PLACE
PEMBROKE PINES, FL 33026

Current Mailing Address:

1350 SAINT CHARLES PLACE
PEMBROKE PINES, FL 33026

FEI Number: 59-1604092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOBELI, MURRAY
1350 SAINT CHARLES PLACE
PEMBROKE PINES, FL 33026 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 DIRECTOR
Name KIBLER, DONALD
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title TREASURER, DIRECTOR
Name MICHEL, ANDRE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name CLINGMAN, CHARLES
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name DIMOF, KATHERINE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name PLATA, LUZ
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name KORELITZ, ANN
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name HIRSCH, FLORENCE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name MOSES, MARTIN
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

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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: KENNEDY ROSARIO

PRESIDENT

01/17/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROSENTHAL, JULES
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title VP, DIRECTOR
Name BENEDICT, LLOYD
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name POLIS, HENNY
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name TRAHEY, CATHY
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMROKE PINES FL 33026

Title DIRECTOR
Name RUIZ, EDNA
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name SHANNON, ELMER
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR, SECRETARY
Name BARTER, EUGENE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title PRESIDENT, DIRECTOR
Name ROSARIO, KENNEDY
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name DERRICK, CLAUDETTE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name LIVERPOOL, GRACE
Address 1350 ST CHARLES PLACE
City-State-Zip: PEMBROKE PINES FL 33026