# 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 737346** 

Entity Name: VILLAGE SQUARE CONDOMINIUM ASSOCIATION, INC.

FILED
Oct 20, 2016
Secretary of State
CC1645687364

# **Current Principal Place of Business:**

7551 NW 16TH STREET PLANTATION, FL 33313

## **Current Mailing Address:**

8200 NW 33RD STREET

SUITE 300

DORAL, FL 33122 US

FEI Number: 59-1735297 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A. 2149 NORTH COMMERCE PARKWAY WESTON, FL 33326 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:

Address

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRESIDENT Title VP, TREASURER

Name NAVALO, NILKA Name AHRINGER, JEFFREY

VILLAGE SQUARE CONDO Address VILLAGE SQUARE CONDO 7551 NW 16TH STREET 7551 NW 16TH STREET

TWW TOTAL TO

City-State-Zip: PLANTATION FL 33313 City-State-Zip: PLANTATION FL 33313

Title DIRECTOR Title DIRECTOR

Name THOMAS, TANYA Name PATTERSON, SASHA

Address VILLAGE SQUARE CONDO Address VILLAGE SQUARE CONDO

7551 NW 16TH STREET 7551 NW 16TH STREET

City-State-Zip: PLANTATION FL 33313 City-State-Zip: PLANTATION FL 33313

Title DIRECTOR Title VP

Name WRIGHT, MARK Name ALI, FERAAZ

Address VILLAGE SQUARE CONDO Address 7551 NW 16TH STREET 7551 NW 16TH STREET

City-State-Zip: PLANTATION FL 33313

Title DIRECTOR Title PROPERTY MANAGER

Name AHRINGER, MAY

Name ADAMS, TENNILLE

Address 7551 NW 16TH STREET

Address 7551 NW 16TH STREET

City-State-Zip: PLANTATION FL 33313

### 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: TENNILLE ADAMS PROPERTY MANAGER 10/20/2016

# Officer/Director Detail Continued:

Title DIRECTOR

NameSCARLETTE, LAHOMAAddress7551 NW 16TH STREETCity-State-Zip:PLANTATION FL 33313