

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747829

**Entity Name:** MARGATE ALLIANCE OF CONDOMINIUM AND HOMEOWNERS ASSOCIATIONS, INC.

**FILED**  
**Feb 25, 2015**  
**Secretary of State**  
**CC5898725939**

**Current Principal Place of Business:**

C/O JANE ADAMS  
5830 CORAL LAKE DRIVE  
MARGATE, FL 33063

**Current Mailing Address:**

C/O JANE ADAMS  
5830 CORAL LAKE DRIVE  
MARGATE, FL 33063 US

**FEI Number:** 59-2245835

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ADAMS, JANE  
C/O JANE ADAMS  
5830 CORAL LAKE DRIVE  
MARGATE, FL 33063 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:** JANE ADAMS

**02/25/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ADAMS, JANE  
Address C/O JANE ADAMS  
5830 CORAL LAKE DRIVE  
City-State-Zip: MARGATE FL 33063

Title SECRETARY  
Name PERRINI, JOHN  
Address 3070 HOLIDAY SPRINGS BLVD  
APT 107  
City-State-Zip: MARGATE FL 33063

Title TREASURER  
Name KRIMBHOLZ, LUCY  
Address 1402 NW 80TH AVE  
APT 504  
City-State-Zip: MARGATE FL 33063

*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:** JOHN PERRINI

**SECRETARY**

**02/25/2015**

Electronic Signature of Signing Officer/Director Detail

Date