2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749479

Entity Name: PIEDMONT "B" ASSOCIATION, INC.

FILED
Apr 29, 2019
Secretary of State
1496347491CC

Current Principal Place of Business:

C/O TRAK PROPERTY MANAGEMENT GROUP 751 PARK OF COMMERCE DR SUITE 116

BOCA RATON, FL 33487

Current Mailing Address:

C/O TRAK PROPERTY MANAGEMENT GROUP 751 PARK OF COMMERCE DR SUITE 116 BOCA RATON, FL 33487 US

FEI Number: 59-2058368 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARD F. HOLODAK P.A. EDWARD F. HOLODAK P.A.

7951 SOUTH WEST 6TH STREET STE 210

PLANTATION, FL 33324 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: EDWARD HOLOKAK 04/29/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 VICE PRESIDENT

 Name
 SKLANSKY, FRANCES
 Name
 COOK, MARSHA

Address C/O TRAK PROPERTY MANAGEMENT Address C/O TRAK PROPERTY MANAGEMENT

GROUP GROUP

751 PARK OF COMMERCE DR SUITE 751 PARK OF COMMERCE DR SUITE

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title TREASURER Title SECRETARY

Name COHEN , ANNE Name SAMORODIN , MARILYN

Address C/O TRAK PROPERTY MANAGEMENT Address C/O TRAK PROPERTY MANAGEMENT

GROUP GROUP

751 PARK OF COMMERCE DR SUITE 751 PARK OF COMMERCE DR SUITE

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

 Title
 T
 Title
 DIRECTOR

 Name
 FINKEL, HARRIET
 Name
 SIROTA, MAX

Address C/O TRAK PROPERTY MANAGEMENT Address C/O TRAK PROPERTY MANAGEMENT

GROUP GROUP

751 PARK OF COMMERCE DR SUITE 751 PARK OF COMMERCE DR SUITE

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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: FRANCES SKLANSKY PRESIDENT 04/29/2019