Entity Name: 74 NORTH CONDOMINIUM ASSOCIATION, INC.			Secretary of State CC5546209226	
Current Prir	ncipal Place of Business:		CC334020	9220
74 GULF BLVD				
INDIAN ROCKS	BEACH, FL 33785			
Current Mai	ling Address:			
PO BOX 618				
BAY PINES,	FL 33744 US			
FEI Number: 59-2250795		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
CERCEK, LISA 19455 GULF BL INDIAN SHORE	-VD # 8A ES, FL 33785 US			
The above named	l entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Florida.	
	I entity submits this statement for the purpose of changing its regi	stered office or regis	0	3/23/2017
	,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	stered office or regis	0	5/23/2017 Date
	Electronic Signature of Registered Agent	stered office or regis	0	
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis	0	
SIGNATURE	Electronic Signature of Registered Agent		03	
SIGNATURE Officer/Direc Title	Electronic Signature of Registered Agent Ctor Detail : VP	Title	03 PRESIDENT SCHUSTER, RANDY 74 GULF BLVD	
SIGNATURE Officer/Direc Title Name	Electronic Signature of Registered Agent Ctor Detail : VP STUMO, MARY 74 GULF BLVD APT 1A	Title Name	03 PRESIDENT SCHUSTER, RANDY 74 GULF BLVD 4A	
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : VP STUMO, MARY 74 GULF BLVD APT 1A	Title Name Address	03 PRESIDENT SCHUSTER, RANDY 74 GULF BLVD 4A	
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	E: LISA CERCEK Electronic Signature of Registered Agent Ctor Detail : VP STUMO, MARY 74 GULF BLVD APT 1A INDIAN ROCKS BEACH FL 33785	Title Name Address	03 PRESIDENT SCHUSTER, RANDY 74 GULF BLVD 4A	
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title	E: LISA CERCEK Electronic Signature of Registered Agent Ctor Detail : VP STUMO, MARY 74 GULF BLVD APT 1A INDIAN ROCKS BEACH FL 33785 SECRETARY, TREASURER	Title Name Address	03 PRESIDENT SCHUSTER, RANDY 74 GULF BLVD 4A	

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: RANDY SCHUSTER

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762808

PRES

FILED Mar 23, 2017