

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003959

Entity Name: ALHAMBRA PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

209 N. BIRCH ROAD
ATTN:FRONT DESK
FORT LAUDERDALE, FL 33304

Current Mailing Address:

209 N. BIRCH ROAD
ATTN:FRONT DESK
FORT LAUDERDALE, FL 33304

FEI Number: 65-1113536

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
1 EAST BROWARD BLVD., SUITE 1800
FT. LAUDERDALE, FL 33301 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 P
Name NOVICK, JIM
Address 209 N BIRCH RD
City-State-Zip: FORT LAUDERDALE FL 33304

Title T
Name STAMATAKIS, MANNY
Address 209 N BIRCH RD
City-State-Zip: FORT LAUDERDALE FL 33304

Title S
Name HURY, HANK
Address 209 N BIRCH RD
City-State-Zip: FORT LAUDERDALE FL 33304

Title D
Name GIORDANO, DENNIS D
Address 209 N BIRCH RD
City-State-Zip: FORT LAUDERDALE FL 33304

Title D
Name SID , WORKMAN D
Address 209 B BIRCH RD
City-State-Zip: FORT LAUDERDALE FL 33304

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: MANNY STAMATAKIS

TREASURER

01/13/2015

Electronic Signature of Signing Officer/Director Detail

Date