2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2014
Secretary of State
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Entity Name: SPRINGCREST CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

4245 N. UNIVERSITY DR
SUNRISE, FL 33351

Current Mailing Address:

4245 N. UNIVERSITY DR
SUNRISE, FL 33351 US

FEI Number: 20-0931783

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD
SUITE C-207
FT. LAUDERDALE, FL 33312 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	DP	Title	DT
Name	CECCHINI, SHELBY	Name	CARDILLO, DORINDA
Address	4235 N UNIVERSITY DR #102	Address	2770-3 E ARRAGON BLVD.
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33313
Title	DS	Title	DV
Name	DEJESUS, SYLVIA	Name	CARDILLO, DORINDA
Address	4255 N UNIVERSITY DR #204	Address	2770-3 ARRAGON BLVD.
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33313
Title	D	Title	D
Name	STANCZAK, FRANK	Name	RENWICK, FRANKLIN
Address	4255 N UNIVERSITY DR. #207	Address	4700 CYPRESS CREEK
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	COCONUT CREEK FL 33073

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: SHELBY CECCHINI PRESIDENT 04/09/2014

Electronic Signature of Signing Officer/Director Detail — Date