

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002134

**FILED**  
**Jan 12, 2014**  
**Secretary of State**  
**CC1134368269**

**Entity Name:** STIRLING SQUARE PROFESSIONAL BUILDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6115 STIRLING ROAD  
SUITE# 101  
DAVIE, FL 33314

**Current Mailing Address:**

6115 STIRLING ROAD  
SUITE# 101  
DAVIE, FL 33314

**FEI Number: 20-8826357**

**Certificate of Status Desired: No**

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

SHAPIRO, SAMUEL  
6115 STIRLING ROAD  
SUITE#101  
DAVIE, FL 33314 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            D  
Name            SHAPIRO, STEVEN  
Address        6115 STIRLING ROAD  
City-State-Zip: DAVIE FL 33314

Title            D  
Name            SHAPIRO, ARLENE  
Address        6115 STIRLING ROAD  
City-State-Zip: DAVIE FL 33314

Title            D  
Name            SHAPIRO, DANIEL  
Address        6115 STIRLING ROAD  
City-State-Zip: DAVIE FL 33314

*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: SHAPIRO, STEVEN**

**D**

**01/12/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date