

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003852

**Entity Name:** SAWGRASS EXECUTIVE CENTER CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 03, 2015**  
**Secretary of State**  
**CC6272948364**

**Current Principal Place of Business:**

1400 NW 107TH AVENUE  
5TH FLOOR  
MIAMI, FL 33172

**Current Mailing Address:**

1400 NW 107TH AVENUE  
5TH FLOOR  
MIAMI, FL 33172

**FEI Number: 20-4671765**

**Certificate of Status Desired: No**

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

SMITHER, ROBERT M  
1400 NW 107TH AVE  
5TH FLR  
MIAMI, FL 33172 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, D  
Name SMITHER, ROBERT M  
Address 1400 NW 107TH AVENUE 5TH FLOOR  
City-State-Zip: MIAMI FL 33172

Title VP, D  
Name BALISH, CHRISTOPHER  
Address 1400 NW 107TH AVENUE 5TH FLOOR  
City-State-Zip: MIAMI FL 33172

Title VP  
Name WONG, RAUL  
Address 480 SAWGRASS CORPORATE PARKWAY  
City-State-Zip: SUNRISE FL 33325

Title T  
Name BARNETT, STEVE  
Address 490 SAWGRASS CORPORATE PARKWAY  
City-State-Zip: SUNRISE FL 33325

*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: ROBERT SMITHER**

**P**

**03/03/2015**

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

\_\_\_\_\_  
Date