

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

DOCUMENT# N12000001394

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC6091146796**

**Entity Name:** ARBOR PLACE CONDOMINIUM PHASE I ASSOCIATION, INC.

**Current Principal Place of Business:**

590 SOLUTIONS WAY  
STE. 100  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

590 SOLUTIONS WAY  
STE. 100  
ROCKLEDGE, FL 32955

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SELIG, MICHAEL W  
590 SOLUTIONS WAY  
STE. 100  
ROCKLEDGE, FL 32955 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:** W. MICHAEL SELIG

**02/23/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VPD  
Name SELIG, MICHAEL W  
Address 200 WILLARD STREET  
City-State-Zip: COCOA FL 32922

Title SD  
Name TORRES, CARLOS M  
Address 4162 SAN YSIDRO WAY  
City-State-Zip: ROCKLEDGE FL 32955

*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:** MICHAEL W. SELIG

**REGISTERED AGENT**

**02/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date