

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

DOCUMENT# N15302

**Entity Name:** ST. TROPEZ CIRCLE MAINTENANCE ASSOCIATION, INC.

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC9772113228**

**Current Principal Place of Business:**

ST. TROPEZ CIRCLE MAINT. ASSOC.  
2600 CRYSTAL POINTE WAY  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

SEACREST SERVICES, INC.  
2400 CENTRE PRK W DR ST 175  
WEST PALM BEACH, FL 33409 US

**FEI Number: 59-2805414**

**Certificate of Status Desired: No**

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

ROSENBAUM MOLLENGARDEN PLLC  
250 AUSTRALIAN AVENUE SOUTH  
5TH FLOOR  
WEST PALM BEACH, FL 33401 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: ED DICKER**

**04/22/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name KAZANJIAN, MARGE  
Address 13249 ST TROPEZ CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title T, SECRETARY  
Name SIMON, JERRY  
Address 13250 ST TROPEZ CIR  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title D  
Name HANSON, LIZ  
Address 13274 ST TROPEZ CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT  
Name ABRAMOW, ANNE  
Address 13305 ST TROPEZ CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name SECONTINE, PAT  
Address 13302 ST. TROPEZ CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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: ANNE ABRAMOW**

**PRESIDENT**

**04/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date