

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18748

Entity Name: SHEFFIELD K CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2950 JOG ROAD
GREENACRES, FL 33467**Current Mailing Address:**2950 JOG ROAD
GREENACRES, FL 33467**FEI Number:** 59-2253489**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARTLEY & MORTON, ATTORNEYS AT LAW, P.A.
800 VILLAGE SQUARE CROSSING
SUITE 222
PALM BEACH GARDENS, FL 33410 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
Name	STOCK, BRYNA
Address	268 SHEFFIELD K
City-State-Zip:	WEST PALM BEACH FL

Title	D
Name	MOYHIHAN, BRENDAN
Address	6142 DELAFIELD AVENUE
City-State-Zip:	RIVERDALE NY 10471

Title	VP
Name	CRUISE, PETER
Address	259 SHEFFIELD K
City-State-Zip:	WEST PALM BCH FL

Title	TREASURER
Name	BIESELIN, PEGGY
Address	114 WELLINGTON C
City-State-Zip:	W. PALM BCH FL 33467

Title	SEC
Name	CRUISE, PETER
Address	257 SHEFFIELD K
City-State-Zip:	WEST PALM BEACH FL 33417

Title	DIRECTOR
Name	MOYNIHAN, BRENDAN
Address	256 SHEFFIELD K
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	ZIMMERMAN, PAULA
Address	247 SHEFFIELD K
City-State-Zip:	WEST PALM BEACH FL 33417

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: PETER CRUISE

VP

03/23/2016

Electronic Signature of Signing Officer/Director Detail_____
Date