

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26655

**FILED
Apr 13, 2016
Secretary of State
CC5609835717**

Entity Name: SOUTHBRIDGE WEST AT PEMBROKE POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024

Current Mailing Address:

C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024 US

FEI Number: 65-0159034

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EISINGER, DENNIS
4000 HOLLYWOOD BLVD SUITE 2655
SUITE 2655
HOLLYWOOD, FL 33021 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 PRES
Name WRIGHT, CARON
Address C/O AMERICAN MANAGEMENT
 GROUP I, LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title VP
Name DOWELL, FRANCO
Address C/O AMERICAN MANAGEMENT
 GROUP I, LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title STD
Name SACCOCIO, PAM
Address C/O AMERICAN MANAGEMENT
 GROUP I, LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

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: SACCOCIO , PAM

STD

04/13/2016

Electronic Signature of Signing Officer/Director Detail

Date