## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32424

Entity Name: THE RESIDENCES OF SAWGRASS MILLS COMMUNITY

ASSOCIATION, INC.

## **Current Principal Place of Business:**

1145 SAWGRASS CORP PKWY. FORT LAUDERDALE, FL 33323

## **Current Mailing Address:**

1145 SAWGRASS CORP PKWY. FORT LAUDERDALE, FL 33323 US

FEI Number: 65-0155329 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KATZMAN GARFINKEL & BERGER 5297 W. COPANS RD. MARGATE, FL 33063 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

**FILED** Mar 20, 2014

**Secretary of State** 

CC2909351934

Officer/Director Detail:

Title PΠ Title SD

Name SANCHEZ, JOHN Name STROUD, GREGG

Address 1145 SAWGRASS CORP. PKWY. Address 1145 SAWGRAS CORP. PKWY.

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title Title TD

HODGERS, BRIAN Name JONES, MONICA Name

Address 1145 SAWGRASS CORP. PKWY. Address 1145 SAWGRASS CORP PKWY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title D Title D

Name LIND, FRANK Name LEE, DELFINA

Address 1145 SAWGRASS CORP PKWY 1145 SAWGRASS CORP PKWY Address

City-State-Zip: SUNRISE FL 33323 SUNRISE FL 33323 City-State-Zip:

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: GREGG STROUD

Electronic Signature of Signing Officer/Director Detail

SEC

03/20/2014