

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39463

**FILED
Apr 11, 2016
Secretary of State
CC6458155924**

Entity Name: TRENT CONDOMINIUM A ASSOCIATION, INC.

Current Principal Place of Business:

C/O CONSOLIDATED COMMUNITY MANAGMENT, INC
7124 N NOB HILL RD
TAMARAC, FL 33321

Current Mailing Address:

C/O CONSOLIDATED COMMUNITY MANAGMENT, INC
7124 N NOB HILL RD
TAMARAC, FL 33321 US

FEI Number: 65-0461933

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EISINGER, BROWN, LEWIS, FRANKEL & CHAIET, P.A
4000 HOLLYWOOD BLVD
SUITE 265-S HOLLYWOOD
LAUDERHILL, 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: EISINGER BROWN

04/11/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MAGNOLNICK, ALVIN
Address C/O CONSOLIDATED COMMUNITY
 MANAGMENT, INC
 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321

Title TREASURER, SECRETARY
Name STONE, KATHY
Address C/O CONSOLIDATED COMMUNITY
 MANAGMENT, INC
 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name GOLDSTEIN, ANNETTE
Address C/O CONSOLIDATED COMMUNITY
 MANAGMENT, INC
 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name HORNSTEIN, SONYA
Address C/O CONSOLIDATED COMMUNITY
 MANAGMENT, INC
 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321

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: ALVIN MAGNOLNICK

PRESIDENT

04/11/2016

Electronic Signature of Signing Officer/Director Detail

Date