#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N93000005523

#### Entity Name: THE PLUMS MASTER ASSOCIATION, INC.

## Current Principal Place of Business:

4300 N UNIVERSITY DR A102 LAUDERHILL, FL 33351

## **Current Mailing Address:**

4300 N UNIVERSITY DR A102 LAUDERHILL, FL 33351 US

# FEI Number: 65-0455827

### Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE SUITE 329 PLANTATION, FL 33324 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

### Officer/Director Detail :

Title	т	Title	D
Name	LEE, LARRY	Name	CAMPBELL, TIM
Address	4300 N UNIVERSITY DR A102	Address	4300 N UNIVERSITY DR A102
City-State-Zip:	LAUDERHILL FL 33351	City-State-Zip:	LAUDERHILL FL 33351
Title	VP	Title	S
Name	RUBINO, MICHAEL	Name	SHEEDY, MERRILL
Address	4300 N UNIVERSITY DR A102	Address	4300 N UNIVERSITY DR A102
City-State-Zip:	LAUDERHILL FL 33351	City-State-Zip:	LAUDERHILL FL 33351
Title	Ρ	Title	D
Name	FRISCIA, DONNA	Name	VICTORIA, CEASAR
Address	4300 N UNIVERSITY DR A102	Address	4300 N UNIVERSITY DR A102
City-State-Zip:	LAUDERHILL FL 33351	City-State-Zip:	LAUDERHILL FL 33351
	Title Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name Address	TitleTNameLEE, LARRYAddress4300 N UNIVERSITY DR A102City-State-Zip:LAUDERHILL FL 33351TitleVPNameRUBINO, MICHAELAddress4300 N UNIVERSITY DR A102City-State-Zip:LAUDERHILL FL 33351TitlePNameFRISCIA, DONNAAddress4300 N UNIVERSITY DR A102	TitleTTitleNameLEE, LARRYNameAddress4300 N UNIVERSITY DR A102AddressCity-State-Zip:LAUDERHILL FL 33351City-State-Zip:TitleVPTitleNameRUBINO, MICHAELNameAddress4300 N UNIVERSITY DR A102AddressCity-State-Zip:LAUDERHILL FL 33351City-State-Zip:TitlePCity-State-Zip:TitlePTitleNameFRISCIA, DONNANameAddress4300 N UNIVERSITY DR A102AddressAddress4300 N UNIVERSITY DR A102Mame

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.

PRESIDENT

### SIGNATURE: DONNA FRISCIA

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 28, 2017 Secretary of State CC5735739664

Certificate of Status Desired: No

Date