#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001521

Entity Name: THE SHEFFIELD "P" CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 08, 2018
Secretary of State
CC2666386677

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

392 SHEFFIELD P

WEST PALM BEACH, FL 33417

# **Current Mailing Address:**

SHEFFIELD P C/O SEACREST SERVICES INC 2400 CENTREPARK W DR #175 WEST PALM BEACH, FL 33409 US

FEI Number: 59-1622733 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MEADOWS, STEVE 392 SHEFFIELD P WEST PALM BEACH, FL 33417 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: STEVE MEADOWS 03/08/2018

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PRESIDENT Title VP

Name MEADOWS, STEVE Name GUREWITZ, ALAN

Address 392 SHEFFIELD P Address 1478 WOODCREST RD N.

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER Title SECRETARY

Name HACKETT, FRANCIS G Name HACKETT, BARBARA

Address 390 SHEFFIELD P Address 381 SHEFFIELD P

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR

Name HOFFMAN, KAREN Address 372 SHEFFIELD P

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: STEVE MEADOWS

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/08/2018