

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005323

FILED
Jan 15, 2024
Secretary of State
5207789504CC

Entity Name: SHERIDAN GLEN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PREMIER ASSOCIATION SERVICES
10112 USA TODAY WAY
MIRAMAR, FL 33025

Current Mailing Address:

PREMIER ASSOCIATION SERVICES
10112 USA TODAY WAY
MIRAMAR, FL 33025 US

FEI Number: 65-0650208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRADY LEGAL, PA
1645 SE 3RD COURT
SUITE 204
DEERFIELD BEACH, FL 33441 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: JACQUELINE GRADY

01/15/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name TAYLOR HANS, STEPHANIE
Address PREMIER ASSOCIATION SERVICES
 2800 W. STATE RD 84 118
City-State-Zip: FT. LAUDERDALE FL 33312

Title VP
Name MALMBORG, MILES
Address PREMIER ASSOCIATION SERVICES
 2800 W. STATE RD 84 118
City-State-Zip: FT. LAUDERDALE FL 33312

Title TREASURER
Name CLAVARIE, KARLENE
Address PREMIER ASSOCIATION SERVICES
 2800 W. STATE RD 84 118
City-State-Zip: FT. LAUDERDALE FL 33312

Title SECRETARY
Name OZTURAN, MEHMET
Address PREMIER ASSOCIATION SERVICES
 2800 W. STATE RD 84 118
City-State-Zip: FT. LAUDERDALE FL 33312

Title DIRECTOR
Name BUSTAMANTE, JOANY
Address PREMIER ASSOCIATION SERVICES
 10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR
Name BUSTAMANTE, JOANY
Address PREMIER ASSOCIATION SERVICES
 10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR
Name RIVERO, LARRY
Address C/O PREMIER ASSOCIATION
 SERVICES
 10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

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: STEPHANIE TAYLOR HANS

PRESIDENT

01/15/2024

Electronic Signature of Signing Officer/Director Detail

Date