

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001484

**FILED
Mar 10, 2016
Secretary of State
CC8039236467**

Entity Name: BIRCH POINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BIRCH POINTE CONDOMINIUM
301 N. BIRCH RD
FT. LAUDERDALE, FL 33304

Current Mailing Address:

BIRCH POINTE CONDOMINIUM
301 N. BIRCH RD
FT. LAUDERDALE, FL 33304 US

FEI Number: 65-0659848

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, MICHAEL
301 N. BIRCH RD.
APT. 4N
FT. LAUDERDALE, FL 33304 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: MICHAEL KELLY

03/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name KELLY, MICHAEL
Address 301 N. BIRCH RD., APT. 4N
City-State-Zip: FT. LAUDERDALE FL

Title DIRECTOR
Name SANDER, WOLFGANG
Address 301 N BIRCH RD
9-N
City-State-Zip: FORT LAUDERDALE FL 33304

Title D, TREASURER
Name HEMPHILL, BARRY
Address 301 N BIRCH RD APT 5N
City-State-Zip: FT LAUDERDALE FL 33304

Title VPD
Name FRIEDLANDER, ROBERT
Address 301 N BIRCH ROAD APT 10S
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR, SECRETARY
Name SIEFF, DAVID
Address BIRCH POINTE CONDOMINIUM
301 N. BIRCH RD APT 6N
City-State-Zip: FT. LAUDERDALE FL 33304

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: MICHAEL KELLY

PRESIDENT

03/10/2016

Electronic Signature of Signing Officer/Director Detail

Date