

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000435

Entity Name: PLYMOUTH AT CENTURY VILLAGE CONDOMINIUM #III
ASSOCIATION, INC.**FILED**
Feb 06, 2019
Secretary of State
4395741195CC**Current Principal Place of Business:**13460 SW 10 STREET
SUITE 101
PEMBROKE PINES, FL 33027**Current Mailing Address:**13460 SW 10 STREET
SUITE 101
PEMBROKE PINES, FL 33027 US**FEI Number: 65-0731809****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**OTTO, CHARLIE ESQ
2699 STIRLING RD
SUITE C-207
FORT LAUDERDALE, FL 33312 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

Date

Officer/Director Detail :

Title	TREASURER
Name	NELSON, SUSIE
Address	601 SW 142ND AVE, Q-106
City-State-Zip:	PEMBROKE PINES FL 33027

Title	SECRETARY
Name	CREAMMER, BILL
Address	571 SW 142 AVE O-202
City-State-Zip:	PEMBROKE PINES FL 33027

Title	DIRECTOR
Name	CORNISH, MILDRED
Address	571 SW 141 AVE N-211
City-State-Zip:	PEMBROKE PINES FL 33027

Title	PRESIDENT
Name	ERICKSON, BEVERLY
Address	701 SW 142 AVE S-105
City-State-Zip:	PEMBROKE PINES FL 33027

Title	DIRECTOR
Name	TRONE, DEBRA
Address	701 SW 141 AVE R-309
City-State-Zip:	PEMBROKE PINES FL 33027

Title	VP
Name	CALOMINO, JOE
Address	601 SW 141 AVE P-311
City-State-Zip:	PEMBROKE PINES FL 33027

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: BEVERLY ERICKSON**PRESIDENT****02/06/2019**

Electronic Signature of Signing Officer/Director Detail

Date