

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000303

FILED
Nov 22, 2014
Secretary of State

Entity Name: UNIVERSITY PLACE A CORPORATE OFFICE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5200 S UNIVERSITY DR
FORT LAUDERDALE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4350 SW 59 AVE.
BLDG. A
DAVIE, FL 33314

New Mailing Address:

C/O LSZM 2699 STIRLING RD
B-205
HOLLYWOOD, FL 33312 US

FEI Number: 14-1876808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

IRVIN W. NACHMAN, P.A.
4441 STIRLING ROAD
DANIA BEACH, FL 33314 US

Name and Address of New Registered Agent:

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: IRVIN NACHMAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D
Name: GRAVIER, LUIS R
Address: 5220 S. UNIVERSITY DRIVE, UNIT 101 C
City-St-Zip: DAVIE, FL 33328

Title: VP/D
Name: EVANS, JAY
Address: 5230 S. UNIVERSITY DRIVE, UNIT 104 D
City-St-Zip: DAVIE, FL 33328

Title: S/D
Name: BREZAULT, THEDY
Address: 5220 S. UNIVERSITY DRIVE, UNIT 204 C
City-St-Zip: DAVIE, FL 33328

Title: T
Name: SILVA, FERNANDO
Address: 5220 S. UNIVERSITY DRIVE, UNIT 102 C
City-St-Zip: DAVIE, FL 33328

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: LUIS GRAVIER

P

11/22/2014

Electronic Signature of Signing Officer or Director

Date