

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001153

FILED
Jan 05, 2006
Secretary of State

Entity Name: SQUIER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4629 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

C/O BARRY ALLWEISS
1032 NW 133 AVENUE
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 33-1110743 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLWEISS, BARRY
1032 NW 133 AVE
SUNRISE, FL 33323 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TSD () Delete
Name: ALLWEISS, BARRY
Address: 1032 NW 133 AVE
City-St-Zip: SUNRISE, FL 33323

Title: PD () Delete
Name: RANDALL, LOREN
Address: 3205 BARTON RD
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: WREN, JOHN
Address: 4629 EL MAR DRIVE, #10
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: MASSA, MARCIA
Address: 4629 EL MAR DRIVE, #5
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: IRIKH, MARY
Address: 4629 EL MAR DRIVE, #6
City-St-Zip: LAUDERDALE BY THE SEA, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARRY ALLWEISS

TSD

01/05/2006

Electronic Signature of Signing Officer or Director

Date