

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36036

FILED
Jan 10, 2011
Secretary of State

Entity Name: MOORINGS AT SHERIDAN MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

1145 SAWGRASS CORP. PKWY.
FORT LAUDERDALE, FL 33323 US

New Principal Place of Business:

Current Mailing Address:

1145 SAWGRASS CORP. PKWY.
FORT LAUDERDALE, FL 33323 US

New Mailing Address:

FEI Number: 65-0180924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD
SUITE C-207
FT. LAUDERDALE, FL 33312 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: PD
Name: WINSELMANN, KURT
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: SD
Name: MCKENNEY, DAVID
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: TD
Name: COLLEEN, DRULARD
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: DEMRICK, DIANE
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: DESMARAIS, YVES
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: LEITER, CARY
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

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: KURT WINSELMANN

PD

01/10/2011

Electronic Signature of Signing Officer or Director

Date