## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000005523

Apr 29, 2011 Secretary of State

Entity Name: THE PLUMS MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ASKEA PROPERTY MANAGEMENT GROUP 299 WEST CAMINO GARDENS BLVD

4400 NORTH FEDERAL HIGHWAY #203

LIGHTHOUSE POINT, FL 33064 US BOCA RATON, FL 33432 US

Current Mailing Address: New Mailing Address:

C/O ASKEA PROPERTY MANAGEMENT GROUP 299 WEST CAMINO GARDENS BLVD 4400 NORTH FEDERAL HIGHWAY #203

LIGHTHOUSE POINT, FL 33064 US BOCA RATON, FL 33432 US

FEI Number: 65-0455827 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE SUITE 315 PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:** 

Title: P

Name: TORROJA-KELLER, MANUELA

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

Title: D

Name: AGUIRRE, GERMAN

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

Title: VP

Name: TAYLOR, DIANN

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

Title: S

Name: SHEEDY, MERRILL

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

Title:

Name: FRISCIA, DONNA

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

Title:

Name: VICTORIA, CEASAR

Address: 299 WEST CAMINO GARDENS BLVD #203

City-St-Zip: BOCA RATON, FL 33432

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: DIANN TAYLOR VP 04/29/2011