

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709349

Entity Name: ANDORIC APTS., INC.**Current Principal Place of Business:**901 SOUTH SURF ROAD
HOLLYWOOD, FL 33019**Current Mailing Address:**901 SOUTH SURF ROAD
HOLLYWOOD, FL 33019**FEI Number:** 59-2608162**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRANIG, BARBARA PRES
901 SOUTH SURF ROAD
205
HOLLYWOOD, FL 33019 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:** BARBARA KRANIG

02/17/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KRANIG, BARBARA
Address 901 SOUTH SURF RD., # 205
City-State-Zip: HOLLYWOOD FL 33019

Title VP
Name RILEY, JOSEPH
Address 901 SOUTH SURF RD, #608
City-State-Zip: HOLLYWOOD FL 33019

Title TD
Name SPENCER, THOMAS
Address 901 S. SURF ROAD # 508
City-State-Zip: HOLLYWOOD FL 33019

Title VP
Name LUPARI, NICHOLAS J
Address 901 SOUTH SURF RD. # 601
City-State-Zip: HOLLYWOOD FL 33019

Title SD
Name KARAS, HAL
Address 901 SOUTH SURF RD.#208
City-State-Zip: HOLLYWOOD FL 33019

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: THOMAS SPENCER

TREASURER

02/17/2014

Electronic Signature of Signing Officer/Director Detail

Date