2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725818

Entity Name: TOPAZ NORTH CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 15, 2014
Secretary of State
CC0920002505

Current Principal Place of Business:

4050 NW 42ND AVENUE

LAUDERDALE LAKES. FL 33319

Current Mailing Address:

4050 NW 42ND AVENUE

LAUDERDALE LAKES. FL 33319 US

FEI Number: 59-1564614 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCCOMBE, JOANN 4090 NW 42ND AVENUE

405

LAUDERDALE LAKES, FL 33319 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.

VΡ

319

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

419

Title PRESIDENT, TREASURER Title

Name TARTAGLIA, ANGELINA Name REBULI, FLORA

Address 4050 NW 42ND AVENUE Address 4050 NW 42ND AVENUE

City-State-Zip: LAUDERDALE LAKES FL 33319 City-State-Zip: LAUDERDALE LAKES FL 33319

Title SECRETARY Title DIRECTOR

Name MCCOMBE, JOANN Name DI FLUMERI, CARMINE

Address 4090 NW 42ND AVENUE Address 4090 NW 42ND AVENUE

City-State-Zip: LAUDERDALE LAKES FL 33319 City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR Title DIRECTOR

Name THOMAS, SHIRLEY Name BERLINGIERI, NICHOLAS

Address 4090 NW 42ND AVENUE Address 4090 NW 42ND AVENUE 402

City-State-Zip: LAUDERDALE LAKES FL 33319 City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name ROSE, MARIE

Address 4090 NW 42ND AVENUE

104

City-State-Zip: LAUDERDALE LAKES FL 33319

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: JOANN MCCOMBE SECRETARY 03/15/2014

Electronic Signature of Signing Officer/Director Detail

Date