

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748132

**Entity Name:** BROOKFIELD SQUARE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 20, 2015**  
**Secretary of State**  
**CC0323443153**

**Current Principal Place of Business:**

2800 N.W. 56TH AVE.  
C-205  
LAUDERHILL, FL 33313

**Current Mailing Address:**

2800 NW 56TH AVE  
C-205  
LAUDERHILL, FL 33313 US

**FEI Number: 59-1971574**

**Certificate of Status Desired: No**

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

BROOKFIELD SQUARE CONDOMINIUM  
2800 NW 56TH AVE.  
C-205  
LAUDERHILL, FL 33313 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: BROOKFIELD SQUARE**

**04/20/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name RHODEN, NORMA  
Address 2800 NW 56TH AVE  
C-205  
City-State-Zip: LAUDERHILL FL 33313

Title TREASURER  
Name FALCONER, LISSA  
Address 2800 NW 56TH AVE  
C-205  
City-State-Zip: LAUDERHILL FL 33313

Title DIRECTOR  
Name AUGUSTIN, PAUL  
Address 2800 NW 56TH AVE  
C-205  
City-State-Zip: LAUDERHILL FL 33313

Title DIRECTOR  
Name SIMPSON, JUDITH  
Address 2800 N.W. 56TH AVE.  
C-205  
City-State-Zip: LAUDERHILL FL 33313

Title SECRETARY  
Name MONESTIME, DEANA  
Address 2800 N.W. 56TH AVE.  
C-205  
City-State-Zip: LAUDERHILL FL 33313

*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: RHODEN , NORMA**

**PRESIDENT**

**04/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date