

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751265

**Entity Name:** SUZANNE PLAZA OWNERS' ASSOCIATION, INC.

**FILED**  
**Mar 09, 2022**  
**Secretary of State**  
**1409737029CC**

**Current Principal Place of Business:**

C/O EXCLUSIVE PROPERTY MANAGEMENT  
2945 W. CYPRESS CREEK ROAD, SUITE 201  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

C/O EXCLUSIVE PROPERTY MANAGEMENT  
2945 W. CYPRESS CREEK ROAD, SUITE 201  
FORT LAUDERDALE, FL 33309

**FEI Number: 59-2326045**

**Certificate of Status Desired: No**

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

BENDER, SCOTT M ESQ.  
3200 N. UNIVERSITY DRIVE  
SUITE 203  
CORAL SPRINGS, FL 33065 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

**Officer/Director Detail :**

Title VP  
Name D'AMICO, SALVATORE  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 W CYPRESS CREEK 201  
City-State-Zip: FORT LAUDERDALE FL 33309

Title SECRETARY  
Name THIBAUT, SHARON  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 W CYPRESS CREEK 201  
City-State-Zip: FORT LAUDERDALE FL 33309

Title PRESIDENT  
Name HOLDEN, JANNA  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 W CYPRESS CREEK STE 201  
City-State-Zip: FORT LAUDERDALE FL 33309

*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: JANNA HOLDEN**

**PRESIDENT**

**03/09/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date