

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

DOCUMENT# N00000000691

**FILED**  
**Feb 26, 2015**  
**Secretary of State**  
**CC0676091730**

**Entity Name:** PLANTATION TECHNOLOGY PARK PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1177 S.E. 3RD. AVE.  
FT. LAUDERDALE, FL 33316-1197

**Current Mailing Address:**

1177 S.E. 3RD. AVE.  
FT. LAUDERDALE, FL 33316-1197

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

ALLSWORTH, EMERSON  
1177 S.E. 3RD. AVE.  
FT. LAUDERDALE, FL 33316-1197 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 PD  
Name MURPHY, BILL  
Address 4300 N. UNIVERSITY DR.,STE.D-103  
City-State-Zip: LAUDERHILL FL 33351

Title VD  
Name CROMPTON, GEORGE V  
Address 6531 NW 13TH CT.  
City-State-Zip: PLANTATION FL 33313

Title SD  
Name OSHEROFF, MARC A  
Address 16400 N.W. 2ND. AVE.,STE.203  
City-State-Zip: NORTH MIAMI FL 33169

Title TD  
Name BITTING, LESLIE EJR.  
Address 1420 N.W. 65TH AVE.  
City-State-Zip: PLANTATION FL 33313

Title D  
Name ALLSWORTH, EMERSON  
Address 1177 S.E. 3RD. AVE.  
City-State-Zip: FT. LAUDERDALE FL 33316-1197

*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: EMERSON ALLSWORTH**

**D**

**02/26/2015**

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

\_\_\_\_\_  
Date