

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007385

**Entity Name:** NOB HILL PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**4788859380CC**

**Current Principal Place of Business:**

1314 SE 2ND AVENUE  
FT. LAUDERDALE, FL 33316

**Current Mailing Address:**

1314 SE 2ND AVENUE  
FT. LAUDERDALE, FL 33316 US

**FEI Number: 20-8328399**

**Certificate of Status Desired: No**

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

MATTEL, HARVEY  
1314 SE 2ND AVENUE  
FT. LAUDERDALE, FL 33316 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           DIRECTOR  
Name           BROWN, JASON  
Address        10167 WEST SUNRISE BOULEVARD  
                  3RD FLOOR  
City-State-Zip: PLANTATION FL 33322

Title           D  
Name           JACOBSON, MARIA  
Address        10167 WEST SUNRISE BOULEVARD,  
                  SUITE 109  
City-State-Zip: PLANTATION FL 33322

Title           D  
Name           BANSAL, SHAILI  
Address        10167 WEST SUNRISE BLVD  
                  2ND FLOOR  
City-State-Zip: PLANTATION FL 33322

*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: JASON BROWN

DIRECTOR

01/17/2020

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

\_\_\_\_\_  
Date