

**2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N21000003071

**Entity Name:** 912 VICTORIA TOWNHOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

912 NE 4TH ST  
FORT LAUDERDALE, FL 33301

**FILED**  
**Jul 27, 2023**  
**Secretary of State**  
**8484881635CR**

**Current Mailing Address:**

C/O PREMIER ASSOCIATION MANAGEMENT  
4502 INVERRARY BLVD  
LAUDERHILL, FL 33319 US

**FEI Number: 88-3116980**

**Certificate of Status Desired: No**

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

PREMIER ASSOCIATION MANAGEMENT  
C/O PREMIER ASSOCIATION MANAGEMENT  
4502 INVERRARY BLVD  
LAUDERHILL, 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.*

**SIGNATURE: NARESH BACHAN**

**07/27/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MCCANN, JAMES  
Address        C/O PREMIER ASSOCIATION  
                  MANAGEMENT  
                  4502 INVERRARY BLVD  
City-State-Zip: LAUDERHILL FL 33319

Title            SECRETARY  
Name            BLACK, LAURA  
Address        C/O PREMIER ASSOCIATION  
                  MANAGEMENT  
                  4502 INVERRARY BLVD  
City-State-Zip: LAUDERHILL FL 33319

Title            TREASURER  
Name            MOLLER, JONATHAN  
Address        C/O PREMIER ASSOCIATION  
                  MANAGEMENT  
                  4502 INVERRARY BLVD  
City-State-Zip: LAUDERHILL FL 33319

Title            DIRECTOR  
Name            GLASSMAN, JEFFREY  
Address        C/O PREMIER ASSOCIATION  
                  MANAGEMENT  
                  4502 INVERRARY BLVD  
City-State-Zip: LAUDERHILL FL 33319

Title            DIRECTOR  
Name            ALLEN, SAMANTHA  
Address        C/O PREMIER ASSOCIATION  
                  MANAGEMENT  
                  4502 INVERRARY BLVD  
City-State-Zip: LAUDERHILL 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: JAMES MCCANN**

**PRESIDENT**

**07/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date