

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28659

**Entity Name:** TEQUESTA PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 22, 2018**  
**Secretary of State**  
**CC3063142854**

**Current Principal Place of Business:**

399 TEQUESTA DR., STE 103  
TEQUESTA, FL 33469

**Current Mailing Address:**

399 TEQUESTA DR., STE 103  
TEQUESTA, FL 33469

**FEI Number: 65-0184936**

**Certificate of Status Desired: No**

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

BRODNER, JOHN  
399 TEQUESTA DR  
103  
TEQUESTA, FL 33469 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 BRODNER, JOHN  
Address 395-399 TEQUESTA DR.  
City-State-Zip: TEQUESTA FL 33469

Title S  
Name MILLER, JOHN  
Address 395-399 TEQUESTA DR  
City-State-Zip: TEQUESTA FL 33469

Title VP  
Name TOBIS, GARY  
Address 395-399 TEQUESTA DR  
City-State-Zip: TEQUESTA FL 33469

Title D  
Name CAUDILL, RICHARD  
Address 395-399 TEQUESTA DR  
City-State-Zip: TEQUESTA FL 33469

*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: BRODNER , JOHN**

**PD**

**01/22/2018**

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

\_\_\_\_\_  
Date