

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38780

**FILED**  
**Apr 05, 2016**  
**Secretary of State**  
**CC9765855866**

**Entity Name:** SHEFFIELD Q CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

200 JACQUELINE DRIVE  
WEST CHESTER, PA 19382

**Current Mailing Address:**

SHEFFIELD Q C/O SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-2359970

**Certificate of Status Desired:** No

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

FRANKFURT, JOEL  
412 SHEFFIELD Q  
WEST PALM BEACH, FL 33417 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:** JOEL FRANKFURT

04/05/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T, SECRETARY  
Name SPERANZA, CAROLYN M  
Address 83 EAGLE DRIVE  
City-State-Zip: TEWKSBURY MA 01876

Title VP  
Name HENRIETTE, BROCHU  
Address 406 SHEFFIELD Q  
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR  
Name MARSH, ERNEST M  
Address 421 SHEFFIELD Q  
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT  
Name FRANKFURT, JOEL  
Address 200 JACQUELINE DRIVE  
City-State-Zip: WEST CHESTER PA 19382

Title DIRECTOR  
Name LASCHIVER, ALEX  
Address 414 SHEFFIELD Q  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** JOEL FRANKFURT BY JGONZALES

**PRESIDENT**

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date