

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012728

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** THE PONCE DE LEON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1607 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

8200 NW 33RD STREET  
300  
MIAMI, FL 33122

**New Mailing Address:**

**FEI Number:** 26-3207453      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

EISINGER, BROWN, LEWIS, FRANKEL, CHAIET & KRUT  
4000 HOLLYWOOD BLVD  
265-S  
HOLLYWOOD, FL 33021 US

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

ROBERT A. FEINGOLD, ESQ.  
3858-S SHERIDAN STREET  
HOLLYWOOD, FL 33021 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: ROBERT A. FEINGOLD, ESQ.

04/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WOLFF, YAIR  
Address: 3180 STIRLING RD.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP  
Name: SOLOMON, JEHEZKEL  
Address: 3180 STIRLING RD.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: S  
Name: LOYD, KELLY P  
Address: 1607 PONCE DE LEON BLVD # 9E  
City-St-Zip: CORAL GABLES, FL 33134

Title: T  
Name: KATZ, RICHARD  
Address: 1607 PONCE DE LEON BLVD # 11A  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: SOREIRO, CECILIA  
Address: 1607 PONCE DE LEON BLVD # 8B  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: LYNN, FRANK  
Address: 1607 PONCE DE LEON BLVD # PHD  
City-St-Zip: CORAL GABLES, FL 33134

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: JEHEZKEL SOLOMON

VP

04/20/2012

Electronic Signature of Signing Officer or Director

Date