## 2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

**DOCUMENT# 709954** 

Entity Name: WILEY CONDOMINIUM APTS., INC.

**FILED** Apr 21, 2022 **Secretary of State** 2296773495CC

## **Current Principal Place of Business:**

1719 WILEY STREET WILEY CONDOMINIUM ASSOCIATION HOLLYWOOD, FL 33020

## **Current Mailing Address:**

WILEY CONDO C/O OFELIA C. CALLE PO BOX 442724 MIAMI, FL 33144 US

FEI Number: 59-1202375 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

**BAUER GUTIERREZ & BORBON PLLC** 814 PONCE DE LEON BLVD SUITE 210 CORAL GABLES, FL 33166 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: OFELIA CALLE 04/21/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title

Title **PRESIDENT** Title **TREASURER** REESE, CRAIG Name CALLE, OFELIA Name

1715 WILEY ST., APT. 6 1715 WILEY STREET Address Address

**UNIT 18** 

City-State-Zip: HOLLYWOOD FL 33020 City-State-Zip:

HOLLYWOOD FL 33020

Title **SECRETARY** ROSS, JASON Name

Name STAJKOVA, ELENA 814 PONCE DE LEON BLVD Address

Address 1715 WILEY STREET SUITE 210

UNIT 5 CORAL GABLES FL 33134

City-State-Zip: City-State-Zip: HOLLYWOOD FL 33020

Title **SECRETARY** Name GRADEL, ILIA 290 174 STREET Address **UNIT 1516** 

SIGNATURE: JASON ROSS

VΡ

City-State-Zip: SUNNY ISLES FL 33160

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.

**VP** 

Electronic Signature of Signing Officer/Director Detail

Date