

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 18, 2014
Secretary of State
CC1785115138

Entity Name: 1820 JAMES AVENUE, INC. A CONDOMINIUM

Current Principal Place of Business:

1820 JAMES AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

P.O. BOX 402336
MIAMI BEACH, FL 33140

FEI Number: 59-1153744

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENNETT, JOAN
765 41ST STREET
MIAMI BEACH, FL 33140 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 D
Name LINDSEY, DAVID
Address 1820 JAMES AVENUE
4D
City-State-Zip: MIAMI BEACH FL 33139

Title SD
Name SALA, EVELIO
Address 1820 JAMES AVENUE #3D
City-State-Zip: MIAMI BEACH FL 33139

Title T/D
Name IVEZIC, LILIANA
Address 1820 JAMES AVENUE 6A
City-State-Zip: MIAMI BEACH FL 33139

Title D
Name ERICSON, THOMAS
Address 1820 JAMES AVENUE # 4A
City-State-Zip: MIAMI BEACH FL 33139

Title PD
Name DEJESUS, CARMEN
Address 1820 JAMES AVENUE #6F
City-State-Zip: MIAMI BEACH FL 33139

Title D
Name SEGAL, STANLEY
Address 1820 JAMES AVENUE
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name GUTMAN, SERGIO
Address 1820 JAMES AVE
4F
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name CASTILLO, HENRY
Address 1820 JAMES AVE
6D
City-State-Zip: MIAMI BEACH FL 33139

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: CARMEN DEJESUS

PD

03/18/2014

Electronic Signature of Signing Officer/Director Detail

Date