

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712954

Entity Name: JADE WINDS ASSOCIATION, INC.**Current Principal Place of Business:**1700 NE 191 STREET
NORTH MIAMI BEACH, FL 33179**Current Mailing Address:**1700 NE 191 STREET
NORTH MIAMI BEACH, FL 33179 US**FEI Number:** 59-1220918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERS & PETERS, ATTORNEYS AT LAW, P.A.
10400 GRIFFIN ROAD, #108
COOPER CITY, FL 33328 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:** KEVIN G. PETERS

03/11/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name RAYMOND, SUSAN
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title PRESIDENT
Name MOINELO, CRISTINA D
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name ROSALES, BERTHA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title SECRETARY
Name PEREZ, DIANA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title TREASURER
Name CESARI, MAUDE
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name GIRALDO, SUSANA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title 1ST VICE PRESIDENT
Name CARCASSES, MERCEDES
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title 2ND VICE PRESIDENT
Name ODESSKY, ALLA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

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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: CRISTINA MOINELO

PRESIDENT

03/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOUVEIA, OLAVO
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name WONG, ANN JULIET
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name SCHWING, LOUIS
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name LARA, CARLOS
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name BERMUDEZ, ZUZANA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name LIFSHITS, ELIZABETH
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name HEFFREN, BRIAN
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179