

2020 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.
9900 STIRLING ROAD
232
COOPER CITY, FL 33024 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

04/10/2020

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	AGIN, LAWRENCE
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	DIRECTOR
Name	REVILLA, TULIO
Address	1700 NE 191 STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33179

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

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

Title	DIRECTOR
Name	BAGAEV, MARAT
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

04/10/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

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

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

Title DIRECTOR
Name DEL VALLE, SONIA
Address 1700 NE 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

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

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