

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717860

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC3220654528**

**Entity Name:** BAYSHORE PLACE CONDOMINIUM, INC.

**Current Principal Place of Business:**

1420 BRICKELL BAY DR  
MIAMI, FL 33131

**Current Mailing Address:**

1420 BRICKELL BAY DR  
MIAMI, FL 33131 US

**FEI Number:** 59-1475007

**Certificate of Status Desired:** No

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

DIAZ, FRANK  
1420 BRICKELL BAY DR  
MIAMI, FL 33131 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:** FRANK DIAZ

01/12/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            REMENYI, ANA M  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            PEREZ-CISNEROS, TERESA  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

Title            SECRETARY  
Name            ACOSTA, ADRIANA  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

Title            D  
Name            MCCAFFERY, MARGARET  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

Title            TREASURER  
Name            ESPAILLAT, MARIA  
Address        1420 BRICKELL BAY DRIVE  
City-State-Zip: MIAMI FL 33131

Title            VP  
Name            MORALES, YOLANDA  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            CASTRESANA, DIANA  
Address        1420 BRICKELL BAY DR  
City-State-Zip: MIAMI FL 33131

*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:** ANA M REMENYI

**PRESIDENT**

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date