#### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 718402** 

Entity Name: KEY BISCAYNE'S COMMODORE CLUB CONDOMINIUM 1, INC.

**FILED** Apr 07, 2021 **Secretary of State** 2021632911CC

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

177 OCEAN LANE DRIVE KEY BISCAYNE. FL 33149

## **Current Mailing Address:**

177 OCEAN LANE DRIVE KEY BISCAYNE. FL 33149 US

FEI Number: 59-1359766 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KEY BISCAYNE FL 33149

104

LERNER P.A., LISA 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES, FL 33144 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: LISA LERNER P.A. 04/07/2021

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

City-State-Zip:

	Title	PRESIDENT	Title	VP
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WAGMAN, STEPHEN Name Name ANDERSONTIFFANY, HOLLY

177 OCEAN LANE DR Address 177 OCEAN LANE DRIVE Address

City-State-Zip:

KEY BISCAYNE FL 33149

City-State-Zip: KEY BISCAYNE FL 33149 City-State-Zip: KEY BISCAYNE FL 33149

Title TREASURER Title **SECRETARY** 

Name GARCIA-ROMERO, SONIA Name REGALADO, CRISTINA

Address 177 OCEAN LANE DRIVE Address 177 OCEAN LANE DRIVE

805

Title **DIRECTOR** Title **DIRECTOR** 

Name RUIZ-FALZONI, DORIS Name CZAHAR, ADRIAN RENE

Address 177 OCEAN LANE DRIVE Address 177 OCEAN LANE DRIVE 706

305

City-State-Zip: KEY BISCAYNE FL 33149 City-State-Zip: KEY BISCAYNE FL 33149

Title **DIRECTOR** Title **DIRECTOR** 

DIRANI, ALESSIO SERRANO, GABRIEL Name Name

Address 177 OCEAN LANE DRIVE Address 177 OCEAN LANE DRIVE

406

KEY BISCAYNE FL 33149 City-State-Zip: KEY BISCAYNE FL 33149 City-State-Zip:

### Continues on page 2

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.

04/07/2021 SIGNATURE: STEPHEN WAGMAN **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name HIDALGO, CAMILO

Address 177 OCEAN LANE DRIVE

900

City-State-Zip: KEY BISCAYNE FL 33149