

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718402

**Entity Name:** KEY BISCAYNE'S COMMODORE CLUB CONDOMINIUM 1, INC.**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:**LERNER, LISA P.A  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name REGALADO, CRISTINA  
Address 177 OCEAN LANE DR 700  
City-State-Zip: KEY BISCAYNE FL 33149

Title VP  
Name MCLAREN, MARGARET  
Address 177 OCEAN LANE DRIVE, 407  
City-State-Zip: KEY BISCAYNE FL 33149

Title PRESIDENT  
Name WAGMAN, STEPHEN  
Address 177 OCEAN LANE DRIVE  
307  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name CZAHR, ADRIAN  
Address 177 OCEAN LANE DRIVE  
305  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name MILLER, MICHELLE  
Address 177 OCEAN LANE DRIVE  
712  
City-State-Zip: KEY BISCAYNE FL 33149

Title TREASURER  
Name FEDORYK, DONALD  
Address 177 OCEAN LANE DRIVE  
800  
City-State-Zip: KEY BISCAYNE FL 33149

Title SECRETARY  
Name RODRIGUEZ, MARIA LULA  
Address 177 OCEAN LANE DR  
304  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name BRICKLE, SAM  
Address 177 OCEAN LANE DR  
1215  
City-State-Zip: KEY BISCAYNE FL 33149

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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:** STEPHEN WAGMAN**PRESIDENT****04/02/2019**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	ANDERSONTIFFANY, HOLLY
Address	177 OCEAN LANE DR 901
City-State-Zip:	KEY BISCAYNE FL 33149