

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724166

**Entity Name:** AVILA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

17620-A ATLANTIC BLVD.  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

C/O SOUTH FLORIDA CONDOMINIUM MANAGEMENT, INC.  
2800 BISCAYNE BLVD SUITE 310  
MIAMI, FL 33137 US

**FEI Number:** 59-1504433

**Certificate of Status Desired:** No

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

SOUTH FLORIDA CONDOMINIUM MANAGEMENT, INC.  
C/O SOUTH FLORIDA CONDOMINIUM MANAGEMENT, INC.  
2800 BISCAYNE BLVD SUITE 310  
MIAMI, FL 33137 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:** DAN WOODRUFF

02/08/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name COLLAZO, ARIEL  
Address 2800 BISCAYNE BLVD  
SUITE 310  
City-State-Zip: MIAMI FL 33137

Title TREASURER  
Name ZIRULINKOFF, SILVANA  
Address 2800 BISCAYNE BLVD  
SUITE 310  
City-State-Zip: MIAMI FL 33137

Title VP  
Name WILK, ALBERT  
Address 2800 BISCAYNE BLVD  
SUITE 310  
City-State-Zip: MIAMI FL 33137

Title SECRETARY  
Name CHAVEZ, ORLANDO  
Address 2800 BISCAYNE BLVD  
SUITE 310  
City-State-Zip: MIAMI FL 33137

Title PRESIDENT, DIRECTOR  
Name FONDACARO, PABLO  
Address 2800 BISCAYNE BLVD  
SUITE 310  
City-State-Zip: MIAMI FL 33137

*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:** PABLO FONDACARO

PRESIDENT

02/08/2024

Electronic Signature of Signing Officer/Director Detail

Date