

**2021 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:**

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

**FEI Number:** 59-1504433

**Certificate of Status Desired:** No

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
C-207  
FORT LAUDERDALE, FL 33312 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:** CHARLES F. OTTO, ESQ.

01/08/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            VRANAU, VASILE SILVIU  
Address        17620-A ATLANTIC BLVD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            TREASURER  
Name            NAPOLITANO, MARIE  
Address        17620-A ATLANTIC BLVD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            VP  
Name            GOLDBERG, STANLEY  
Address        17620-A ATLANTIC BLVD.  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            DIRECTOR  
Name            WAGIM, JOSEPH  
Address        17620-A ATLANTIC BOULEVARD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            SECRETARY  
Name            TALAVERA, MARTHA  
Address        17620-A ATLANTIC BOULEVARD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** VASILE SILVIU VRANAU

PRESIDENT

01/08/2021

Electronic Signature of Signing Officer/Director Detail

Date