

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724214

**FILED**  
**Mar 07, 2013**  
**Secretary of State**  
**CC7132016630**

**Entity Name:** PLAYA DEL SOL ASSOCIATION, INC

**Current Principal Place of Business:**

3500 GALT OCEAN DR.  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

3500 GALT OCEAN DR.  
FT. LAUDERDALE, FL 33308

**FEI Number:** 59-1522423

**Certificate of Status Desired:** No

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

KATZMAN GARFINKEL & BERGER  
5297 WEST COPANS RD  
MARGATE, FL 33063 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:** LEIGH KATZMAN

03/07/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SOHN, GAE  
Address        3500 GALT OCEAN DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            SECRETARY  
Name            KING, ROBERT  
Address        3500 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            TREASURER  
Name            KENNETT, JOHN  
Address        3500 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            D  
Name            VALENTI, ROBERT  
Address        3500 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            D  
Name            LATTERA, VICTOR  
Address        3500 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            VP  
Name            SUNDAY, DANIEL  
Address        3500 GALT OCEAN DR.  
City-State-Zip: FT. LAUDERDALE FL 33308

Title            DIRECTOR  
Name            ABRAMOWITZ, ROSS  
Address        3500 GALT OCEAN DR.  
City-State-Zip: FT. LAUDERDALE FL 33308

*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:** GAE SOHN

**PRESIDENT**

03/07/2013

Electronic Signature of Signing Officer/Director Detail

Date