

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

DOCUMENT# 725380

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

**Current Principal Place of Business:**

3400 3410 GALT OCEAN DRIVE  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

3400 3410 GALT OCEAN DRIVE  
FT. LAUDERDALE, FL 33308

**FEI Number:** 59-1539624

**Certificate of Status Desired:** No

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

GAVIN, JAMES ESQ.  
C/O SAAVEDRA, PELOSI, GOODWIN & HERMANN  
312 SE 17TH STREET 2ND FL  
FORT LAUDERDALE, FL 33316 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:** JAMES GAVIN

07/11/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            YUE , VICTOR  
Address        3410 GALT OCEAN DRIVE #1001N  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            1 VP  
Name            JAFFEE , ELAINE  
Address        3400 GALT OCEAN DRIVE #1510S  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            EPSTEIN, FRANCES  
Address        3400 GALT OCEAN #1106S  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            PECCIA, ANTHONY  
Address        3410 GALT OCEAN DRIVE #PH3N  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            BEBERMAN, MICHELE  
Address        3400 GALT OCEAN DRIVE #310N  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            KATZ, MICHAEL  
Address        3410 GALT OCEAN DRIVE #1202  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            2 VP  
Name            BARRETT, VAL  
Address        3400 S GALT OCEAN DR #1603S  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            SECRETARY  
Name            RODRIGUEZ, VOLNEY  
Address        3410 N GALT OCEAN DR #1110 N  
City-State-Zip: FORT LAUDERDALE FL 33308

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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:** JAFFEE , ELAINE

VP

07/11/2013

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           GABRIELLE, RICHARD  
Address        3400 GALT OCEAN DRIVE # 604S  
City-State-Zip: FORT LAUDERDALE FL 33308