## 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 725933** 

Entity Name: GOLDEN GLADES OFFICE PARK CONDOMINIUM ASSOCIATION

SECTION 1, INC.

**Current Principal Place of Business:** 

ASSOCIATION SECTION 1, INC. 520 NW 165 ST. RD., STE 101 MIAMI, FL 33169

## **Current Mailing Address:**

ASSOCIATION SECTION 1, INC. 520 NW 165 ST. RD., STE 101 MIAMI, FL 33169 US

FEI Number: 59-1684084 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FROST, CARLOS 520 NW 165 ST RD #101

MIAMI, FL 33169 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: CARLOS FROST 06/24/2015

Electronic Signature of Registered Agent Date

**FILED** 

Jun 24, 2015

Secretary of State CC3471737755

Officer/Director Detail:

Title PRESIDENT Title VP

Name FAINCAIG MEIDLER, BERNARDO Name SCHAFFER GOLDIN, ALVARO

Address C/O N. BETTY GONZALEZ FERNANDO

255 UNIVERSITY DRIVE
Address
C/O N. BETTY GONZALEZ
255 UNIVERSITY DRIVE

City-State-Zip: CORAL GABLES FL 33134

City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY Title DIRECTOR

Name LITVAN, NICOLAS Name TARABAL, GONZALO

Address C/O N. BETTY GONZALEZ, ESQ 255 UNIVERSITY DR Address C/O BETTY GONZALEZ

City-State-Zip: CORAL GABLES FL 33134

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name BOBRE KOMIN, DAVID DANIEL

Address C/O BETTY GONZALEZ

255 UNIVERSITY DR

City-State-Zip: CORAL GABLES FL 33134

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: BERNARDO FAINCAIG MEIDLER PRESIDENT 06/24/2015