

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728578

Entity Name: THE CLINTON ASSOCIATION, INC.**Current Principal Place of Business:**6545 INDIAN CREEK DRIVE
MIAMI, FL 33141**Current Mailing Address:**I/C/O MIAMI POWERHOUSE MANAGEMENT
1000 FIFTH STREET 218
MIAMI BEACH, FL 33139 US**FEI Number:** 59-1521822**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MIAMI POWERHOUSE MANAGEMENT
1000 FIFTH STREET
218
MIAMI BEACH, FL 33139 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:** BETSY MORALES

04/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ROSENFELD, ROBERTO
Address I/C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET 218
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name ALFARONE, FRANK
Address I/C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET 218
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY
Name DANIEL, CRUZ
Address I/C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET 218
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER
Name REYES, LUIS
Address I/C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET 218
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name DAUSSY-JONES, MARCELLE
Address I/C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET 218
City-State-Zip: MIAMI BEACH FL 33139

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: ROSENFELD , ROBERTO

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04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date