

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728624

Entity Name: PATHWAY CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 03, 2020
Secretary of State
4669689715CC

Current Principal Place of Business:

C/O LYNX PROPERTY SERVICES, LLC
12485 SW 137 AVENUE SUITE 309
MIAMI, FL 33186

Current Mailing Address:

C/O LYNX PROPERTY SERVICES, LLC
12485 SW 137 AVENUE SUITE 309
MIAMI, FL 33186 US

FEI Number: 59-1568662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEREZ-SIAM, FRANK ESQ.
7001 SW 87 COURT
MIAMI, FL 33173 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: FRANK PEREZ-SIAM

04/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PROCOPIO, LUANNE
Address C/O LYNX PROPERTY SERVICES, LLC
 12485 SW 137 AVENUE SUITE 309
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name GREEN, ANDREW
Address C/O LYNX PROPERTY SERVICES, LLC
 12485 SW 137 AVENUE SUITE 309
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name PELLEYA, CRISTINA
Address C/O LYNX PROPERTY SERVICES, LLC
 12485 SW 137 AVENUE SUITE 309
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name COLOMA, TANYA
Address C/O LYNX PROPERTY SERVICES, LLC
 12485 SW 137 AVENUE SUITE 309
City-State-Zip: MIAMI FL 33186

Title TREASURER, SECRETARY
Name GARCIA, SEBASTIAN
Address C/O LYNX PROPERTY SERVICES, LLC
 12485 SW 137 AVENUE SUITE 309
City-State-Zip: MIAMI FL 33186

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: PROCOPIO LUANNE

PRESIDENT

04/03/2020

Electronic Signature of Signing Officer/Director Detail

Date