SIGNATURE: ROHAN WILLIAMS

Electronic Signature of Signing Officer/Director Detail

| 2014 FLORIDA NOT | FOR PROFIT | CORPORATION | ANNUAL REPORT |
|------------------|------------|-------------|---------------|
| | | | |

DOCUMENT# 728948

Entity Name: MISSIONWOOD AT MIRAMAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8381 S. MISSIONWOOD CIRCLE MIRAMAR, FL 33025

Current Mailing Address:

C/O CHERRY BEKAERT LLC - CONDO DEPT 2525 PONCE DE LEON BLVD - SUITE 1040 CORAL GABLES, FL 33134 US

FEI Number: 59-1506683

Name and Address of Current Registered Agent:

SHENDELL & ASSOCIATES, P.A. 5340 N FEDERAL HWY., STE 201 LIGHTHOUSE POINT, FL 33064 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | VP | Title | D |
|----------------|------------------------------------|-----------------|-------------------------------------|
| Name | DALEY, HESLOP | Name | MCNEIL, INA |
| Address | 2914 E. MISSIONWOOD LN #46C | Address | 8444 WEST MISSIONWOOD DR |
| City-State-Zip | : MIRAMAR FL 33025 | City-State-Zip: | MIRAMAR FL 33025 |
| Title | PRESIDENT | Title | DIRECTOR |
| Name | WILLIAMS, ROHAN SR. | Name | JOHNSON, ANGELA |
| Address | 3041 WEST MISSIONWOOD LN #34D | Address | 3037 EAST MISSIONWOOD CIR # 59C |
| City-State-Zi | D: MIRAMAR FL 33025 | City-State-Zip: | MIRAMAR FL 33025 |
| Title | SECRETARY | Title | DIRECTOR |
| Name | FRECKLETON, JENNIFER | Name | PINARGOTE, JOSE |
| Address | 8360 SOUTH MISSIONWOOD CIR #62D | Address | 8340 NORTH MISSIONWOOD CIR #22C |
| City-State-Zi | b: MIRAMAR FL 33025 | City-State-Zip: | |
| Title | DIRECTOR | Title | TREASURER |
| Name | RIDLEY, LEOTYNE | Name | O'HARA, MICHAEL |
| Address | 2933 WEST MISSIONWOOD CIR 31C | Address | 3027 WEST MISSIONWOOD LANE # 35B |
| City-State-Zip | : MIRAMAR FL 33025 | | |
| | | City-State-Zip: | MIRAMAR FL 33025 |

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.

PRESIDENT

Date

Certificate of Status Desired: No

02/11/2014 Date