

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729695

FILED
Apr 28, 2015
Secretary of State
CC2034975902

Entity Name: ISLAND TERRACE CONDOMINIUM ASSOCIATON, INC.

Current Principal Place of Business:

5 ISLAND AVENUE
MANAGEMENT OFFICE
MIAMI, FL 33139

Current Mailing Address:

5 ISLAND AVENUE
MANAGEMENT OFFICE
MIAMI, FL 33139 US

FEI Number: 59-1704505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RANDALL , ROGER K
621 NW 53RD ST
300
BOCA RATON, FL 33487 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: RANDALL ROGER

04/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER
Name PARKER, KUNAL
Address 5 ISLAND AVENUE
MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

Title VP
Name ZUR, THOMAS
Address 5 ISLAND AVENUE
MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

Title OFFICER
Name KNIGHT, JENNIFER K
Address 5 ISLAND AVENUE
MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

Title TREASURER
Name NEUSTEDTER, RICHARD
Address 5 ISLAND AVENUE
MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

Title DIRECTOR
Name TRACY, MONICA
Address 5 ISLAND AVENUE
MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

Title PRESIDENT
Name ROBBINS, JACK
Address 5 ISLAND AVE
MANAGEMENT OFFICE
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY
Name LEE, RUSSELL
Address 5 ISLAND AVE
MANAGEMENT OFFICE
City-State-Zip: MIAMI BEACH FL 33139

Title OFFICER
Name BASSEL, ALEXANDRA
Address 5 ISALND AVE
MANAGEMENT OFFICE
City-State-Zip: MIAMI BEACH FL 33139

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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: JACK ROBBINS

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name ABADILLA, IAN
Address 5 ISLAND AVE
MANAGEMENT OFFICE
City-State-Zip: MIAMI BEACH FL 33139