# 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 729695** 

Entity Name: ISLAND TERRACE CONDOMINIUM ASSOCIATON, INC.

**FILED** May 22, 2023 Secretary of State 1215276325CC

# **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:

ROGER, RANDALL 621 NW 53RD STREET SUITE 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 05/22/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

MIAMI FL 33139

City-State-Zip:

Address

Title DIRECTOR Title **SECRETARY** Name SUSOY, SELIN Name LEAH, KAREN

Address **5 ISLAND AVENUE** Address 5 ISLAND AVENUE MANAGEMENT OFFICE MANAGEMENT OFFICE

MIAMI FL 33139

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI FL 33139

**TREASURER** Title **PRESIDENT** Title Name ROBBINS, JACK Name SEJEN, LAURA

Address **5 ISLAND AVENUE** Address **5 ISLAND AVENUE** 

> MANAGEMENT OFFICE MANAGEMENT OFFICE

> > City-State-Zip:

Title DIRECTOR Title DIRECTOR

CUELLO, OSCAR KEAN, ALEXANDER Name Name

> **5 ISLAND AVENUE** Address **5 ISLAND AVENUE** MANAGEMENT OFFICE MANAGEMENT OFFICE

City-State-Zip: MIAMI FL 33139 City-State-Zip: MIAMI FL 33139

VICE PRESIDENT Title Title DIRECTOR

Name LUCE. ALEXANDER DANIEL Name DECARO, BRANDAN

Address **5 ISLAND AVENUE** Address 5 ISLAND AVE MANAGEMENT OFFICE

MANAGEMENT OFFICE

MIAMI FL 33139 MIAMI BEACH FL 33139 City-State-Zip: City-State-Zip:

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.

05/22/2023 SIGNATURE: JACK ROBBINS **PRESIDENT**