

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729695

FILED
Jan 13, 2021
Secretary of State
8240899984CC

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
5 ISLAND AVENUE
MANAGEMENT OFFICE
MIAMI, 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: RANDALL ROGER

01/13/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title DIRECTOR
Name SUR, JENNIFER
Address 5 ISLAND AVENUE
 MANAGEMENT OFFICE
City-State-Zip: MIAMI BEACH FL 33139

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

Title PRESIDENT
Name WAGNER, TRACEE
Address 5 ISLAND AVENUE
 MANAGEMENT OFFICE
City-State-Zip: MIAMI FL 33139

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

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

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

Title VICE PRESIDENT
Name SIMPSON, GEOFFREY
Address 5 ISLAND AVENUE
 MANAGEMENT OFFICE
City-State-Zip: MIAMI 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: TRACEE WAGNER

PRESIDENT

01/13/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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