

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729881

Entity Name: THE CRICKET CLUB CONDOMINIUM, INC.**Current Principal Place of Business:**1800 NE 114 STREET
MANAGEMENT OFFICE
N. MIAMI, FL 33181**Current Mailing Address:**1800 NE 114 STREET
MANAGEMENT OFFICE
N. MIAMI, FL 33181**FEI Number:** 59-1569751**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEON-RUBIDO ESQ, MARLENE
6780 CORAL WAY
MIAMI, FL 33155 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_____
Date**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR
Name LIEBER, ARNOLD L
Address 1800 NE 114 ST #908
City-State-Zip: MIAMI FL 33181

Title VP, DIRECTOR
Name LIPSITZ, NANCY
Address 1800 NE 114 ST #704
City-State-Zip: MIAMI FL 33181

Title TREASURER, DIRECTOR
Name ROTH, KENNETH
Address 1800 NE 114 ST #809
City-State-Zip: MIAMI FL 33181

Title SECRETARY, DIRECTOR
Name DEHART, MOLLIE F.
Address 1800 NE 114 ST, #403
City-State-Zip: MIAMI FL 33181

Title DIRECTOR
Name SIEGEL, HAROLD
Address 1800 NE 114 ST #1608
City-State-Zip: MIAMI FL 33181

Title DIRECTOR
Name FRIEDMAN, KAYLA
Address 1800 NE 114 ST #1205
City-State-Zip: N MIAMI FL 33181

Title DIRECTOR
Name BRUG-CHMIELENSKA, MARIA
Address 1800 NE 114 ST #409
City-State-Zip: N MIAMI FL 33181

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: ARNOLD L LIEBER

P

03/05/2019

Electronic Signature of Signing Officer/Director Detail_____
Date