2019 FLORIDA NOT FOR PR	OFIT CORPORATION ANNUAL REPORT
DOCUMENT# 731616	

Entity Name: THE REEF CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

16558 NE 26TH AVE N MIAMI BEACH, FL 33160

Current Mailing Address:

16558 NE 26TH AVE N MIAMI BEACH, FL 33160 US

FEI Number: 59-1636035

Name and Address of Current Registered Agent:

TUCKER & LOKEINSKY, P.A. 800 E. BROWARD BLVD., SUITE 710 FT. LAUDERDALE, FL 33301 US

Certificate of Status Desired: No

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	DIRECTOR	Title	SECRETARY
Name	SUSAN GLAZER	Name	MARIA TOMEU
Address	16558 NE 26TH AVE	Address	16558 NE 26TH AVE
City-State-Zip:	N. MIAMI BEACH FL 33160	City-State-Zip:	N. MIAMI BEACH FL 33160
Title	PRESIDENT	Title	DIRECTOR
Name	ALLEN, ROSHNI	Name	PAIZ, RICHARD
Address	16558 NE 26TH AVE	Address	16558 NE 26 AVE
City-State-Zip:	NORTH MIAMI BEACH FL 33160	City-State-Zip:	NORTH MIAMI BEACH FL 33160
Title	D	Title	TREASURER
Title Name	D RADGON, GLEN	Title Name	TREASURER WINTER, ROBERT
	-		
Name	RADGON, GLEN	Name	WINTER, ROBERT 16558 NE 26 AVE
Name Address City-State-Zip:	RADGON, GLEN 16558 NE 26 AVE	Name Address	WINTER, ROBERT 16558 NE 26 AVE
Name Address	RADGON, GLEN 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160	Name Address City-State-Zip:	WINTER, ROBERT 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160
Name Address City-State-Zip: Title	RADGON, GLEN 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160 VP	Name Address City-State-Zip: Title	WINTER, ROBERT 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160 DIRECTOR
Name Address City-State-Zip: Title Name	RADGON, GLEN 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160 VP GONZALEZ, VIVIAN 16558 NE 26 AVE	Name Address City-State-Zip: Title Name	WINTER, ROBERT 16558 NE 26 AVE NORTH MIAMI BEACH FL 33160 DIRECTOR ARNDT , THOMAS 16565 NE 26TH AVENUE APT 4E

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: ELISABEL DARDE

OFFICE MANAGER

03/15/2019

Electronic Signature of Signing Officer/Director Detail

Date

Date

FILED Mar 15, 2019 Secretary of State 3633280817CC