| Name            | CHEVLIN, RAE   | Name            | SLEPOY, YOSAIF |
|-----------------|----------------|-----------------|----------------|
| Address         | 7665 NW 50 ST  | Address         | 7665 NW 50 ST  |
| City-State-Zip: | MIAMI FL 33166 | City-State-Zip: | MIAMI FL 33166 |
|                 |                |                 |                |
| Title           | D              | Title           | DIRECTOR       |
| Name            | ENGEL, P'NINA  | Name            | TOKAYER, LARRY |
| Address         | 7665 NW 50 ST  | Address         | 7665 NW 50 ST  |
| City-State-Zip: | MIAMI FL 33166 | City-State-Zip: | MIAMI FL 33166 |
|                 |                |                 |                |

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. PRESIDENT

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

SIGNATURE: GIBEL, ROSANNE

DOCUMENT# 734281

# Entity Name: THE NEW LAND GARDENS CONDOMINIUM ASSOCIATION, INC.

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

UNLIMITED PROPERTY MAMAGEMENT, LLC 7665 NW 50 ST MIAMI, FL 33166

### **Current Mailing Address:**

UNLIMITED PROPERTY MAMAGEMENT, LLC 7665 NW 50 ST MIAMI, FL 33166

### FEI Number: 59-1883600

### Name and Address of Current Registered Agent:

UNLIMITED PROPERTY MGMT, LLC 7665 NW 50 ST MIAMI, FL 33166 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

## **Officer/Director Detail :**

| Title           | S                | Title           | Р              |
|-----------------|------------------|-----------------|----------------|
| Name            | SAN SOLO, SHELLY | Name            | GIBEL, ROSANNE |
| Address         | 7665 NW 50 ST    | Address         | 7665 NW 50 ST  |
| City-State-Zip: | MIAMI FL 33166   | City-State-Zip: | MIAMI FL 33166 |
| Title           | т                | Title           | VP             |
| Name            | CHEVLIN, RAE     | Name            | SLEPOY, YOSAIF |
| Address         | 7665 NW 50 ST    | Address         | 7665 NW 50 ST  |
| City-State-Zip: | MIAMI FL 33166   | City-State-Zip: | MIAMI FL 33166 |
| Title           | D                | Title           | DIRECTOR       |
| Name            | ENGEL, P'NINA    | Name            | TOKAYER, LARRY |
| Address         | 7665 NW 50 ST    | Address         | 7665 NW 50 ST  |
| City-State-Zip: | MIAMI FL 33166   | City-State-Zip: | MIAMI FL 33166 |

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Date