

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735308

**Entity Name:** GOLDEN WEST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1345 WEST AVE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1234 WASHINGTON AVENUE  
SUITE 305  
MIAMI BEACH, FL 33139 US

**FEI Number:** 59-1746371

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGATTA REAL ESTATE MANAGEMENT  
1234 WASHINGTON AVENUE  
SUITE 305  
MIAMI BEACH, 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:** LOURDES PION

04/23/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BROOKS, AURA  
Address 1345 WEST AVE  
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY  
Name TORRES, JUAN  
Address 1345 WEST AVE  
501  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name GUARINI, KATHRYN  
Address 1345 WEST AVE  
301  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name KIRKLAND, CORINNE  
Address 1345 WEST AVE  
701  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name LEVINE, SUSANA  
Address 1345 WEST AVE  
604  
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER  
Name SERAFINI, SEVERIN  
Address 1345 WEST AVE  
801  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name PATEL, MANISH  
Address 1345 WEST AVE  
502  
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT  
Name SCHEIDT, NICHOLAS DR.  
Address 1345 WEST AVE.  
#504  
City-State-Zip: MIAMI BEACH 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:** NICHOLAS SCHEIDT

PRESIDENT

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name DOONIE, DARRYL  
Address 1345 WEST AVE  
903  
City-State-Zip: MIAMI BEACH FL 33139