2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 736626

Entity Name: WINSTON TOWERS 500 ASSOCIATION, INC.

FILED Mar 16, 2022 Secretary of State 8029877657CC

Current Principal Place of Business:

C/O REALMANAGE 9050 PINES BLVD SUITE 480 PEMBROKE PINES, FL 33024

Current Mailing Address:

C/O REALMANAGE P O BOX 803555 DALLAS, TX 75380 US

FEI Number: 59-1688020 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEIR, CAROLINA SZNAJDERMAN ESQ. **EISINGER LAW** 4000 HOLLYWOOD BLVD. STE. 265-S HOLLYWOOD, FL 33021 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: CAROLINA SZNAJDERMAN SHEIR. ESQ. 03/16/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

Name ROIMESHER, LEON Name SILVER, GARY

Address C/O REALMANAGE Address C/O REALMANAGE

> 9050 PINES BLVD SUITE 480 9050 PINES BLVD SUITE 480

City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33024

Title **TREASURER** Title **SECRETARY**

Name MARTINEZ, JORGE Name HERNANDEZ, JOSE

Address C/O REALMANAGE Address C/O REALMANAGE 9050 PINES BLVD SUITE 480

9050 PINES BLVD SUITE 480 City-State-Zip: City-State-Zip: PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024

Title DIRECTOR Title DIRECTOR

LUBITZ, PAMELA LINDERMAN, NED Name Name

C/O REALMANAGE Address C/O REALMANAGE 9050 PINES BLVD SUITE 480

9050 PINES BLVD SUITE 480 City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR Name CHAVES, JULIO Address C/O REALMANAGE

Address

9050 PINES BLVD SUITE 480

PEMBROKE PINES FL 33024 City-State-Zip:

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.

03/16/2022 SIGNATURE: LEON ROIMESHER **PRESIDENT**