

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

DOCUMENT# 741543

**Entity Name:** BAL HARBOUR 101 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10155 COLLINS AVENUE  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

10155 COLLINS AVENUE  
BAL HARBOUR, FL 33154

**FEI Number: 59-1901485**

**Certificate of Status Desired: No**

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

EISINGER, DENNIS  
4000 HOLLYWOOD BLVD  
SUITE E265 SOUTH  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR  
Name TRAVIS, THOMAS  
Address 10155 COLLINS AVENUE  
1807  
City-State-Zip: BAL HARBOUR FL 33154

Title DIRECTOR  
Name FORER, MINNA L  
Address 10155 COLLINS AVE  
1603  
City-State-Zip: BAL HARBOUR FL 33154

Title DIRECTOR  
Name RATZKER, MENNO  
Address 10155 COLLINS AVENUE  
1802  
City-State-Zip: BAL HARBOUR FL 33154

Title TREASURER, DIRECTOR  
Name JACOBS, MARTIN  
Address 10155 COLLINS AVENUE  
1209  
City-State-Zip: BAL HARBOUR FL 33154

Title DIRECTOR, PRESIDENT  
Name PODVISOKY, FIMA  
Address 10155 COLLINS AVENUE  
PH-04  
City-State-Zip: HOLLYWOOD FL 33154

Title DIRECTOR, SECRETARY  
Name GOLUMB, CYNTHIA  
Address 10155 COLLINS AVENUE  
205  
City-State-Zip: BAL HARBOUR FL 33154

Title VP, DIRECTOR  
Name SLATE, RAYMOND  
Address 10155 COLLINS AVENUE  
1004  
City-State-Zip: BAL HARBOUR FL 33154

*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: MINNA LEA FORER**

**DIRECTOR**

**04/04/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date