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: DONALD DOLCE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

BECKER & POLIAKOFF 2525 PONCE DE LEON BLVD SUITE 825 CORAL GABLES, FL 33134-4862 US

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 743997

Entity Name: MICHIGAN TERRACE ASSOCIATION, INC.

### **Current Principal Place of Business:**

750 MICHIGAN AVE MIAMI BEACH. FL 33139

### **Current Mailing Address:**

1235 ALTON ROAD SUITE A MIAMI BEACH, FL 33139 US

# FEI Number: 20-5415956

## Name and Address of Current Registered Agent:

SIGNATURE	MICHAEL GONGORA		
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	PRESIDENT	Title	SECRETARY
Name	DOLCE, DONALD	Name	LA LLAVE , MICHELLE
Address	1235 ALTON ROAD SUITE A	Address	1235 ALTON ROAD SUITE A
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139
Title	TREASURER	Title	MANAGER
Name	BURNS, ANTHONY	Name	SHAPIRO, DAN
Address	1235 ALTON ROAD SUITE A	Address	1235 ALTON ROAD SUITE A
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

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.

Certificate of Status Desired: No

02/23/2024 Date

FILED Feb 23, 2024 Secretary of State 4671245082CC

> 02/23/2024 Date