2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 751048

Entity Name: SOUTH BAY CLUB CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 03, 2016
Secretary of State
CC4946840718

Current Principal Place of Business:

800 WEST AVENUE MIAMI BEACH, FL 33139

Current Mailing Address:

% KW PROPERTY MANAGEMENT 8200 NW 33RD STREET, SUITE 300 MIAMI, FL 33122 US

FEI Number: 59-2064543 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YELLIN, JONATHAN A ESQ. % SLUSHER, YELLIN & ROSENBAUM, PA 324 DATURA STREET SUITE#324 WEST PALM BEACH, FL 33401 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: JONATHAN YELLIN 03/03/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

Name UPSHON, AILEEN Name FLOREZ, CHRISTINE

Address % KW PROPERTY MANAGEMENT Address % KW PROPERTY MANAGEMENT

8200 NW 33RD STREET, SUITE 300 8200 NW 33RD STREET, SUITE 300

City-State-Zip: MIAMI FL 33122 City-State-Zip: MIAMI FL 33122

Title DIRECTOR Title TREASURER

Name FLEMING, ROBERT Name LAFFORGUE, PABLO

Address % KW PROPERTY MANAGEMENT Address % KW PROPERTY MANAGEMENT

8200 NW 33RD STREET, SUITE 300 8200 NW 33RD STREET, SUITE 300

City-State-Zip: MIAMI FL 33122 City-State-Zip: MIAMI FL 33122

Title SECRETARY Title VP

Name HELMINEN, RITA Name PETROLE, LOUIS

Address % KW PROPERTY MANAGEMENT Address % KW PROPERTY MANAGEMENT

8200 NW 33RD STREET, SUITE 300 8300 NW 33RD STREET 300

City-State-Zip: MIAMI FL 33122 City-State-Zip: MIAMI FL 33122

Title DIRECTOR

Name BROADHEAD, GARRY

Address % KW PROPERTY MANAGEMENT

8200 NW 33RD STREET, SUITE 300

City-State-Zip: MIAMI FL 33122

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: AILEEN UPSHON P 03/03/2016