

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752089

**FILED**  
**Feb 28, 2024**  
**Secretary of State**  
**3228435465CC**

**Entity Name:** THE TOWERS OF QUAYSIDE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ONE QUAYSIDE BLVD.  
MIAMI, FL 33138

**Current Mailing Address:**

ONE QUAYSIDE BLVD.  
MIAMI, FL 33138

**FEI Number: 59-2023759**

**Certificate of Status Desired: Yes**

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

DAVIS, THOMAS  
ONE QUAY BLVD  
MIAMI, FL 33138 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            PRESIDENT  
Name            SOTO, ALINA  
Address        1000 QUAYSIDE TERRACE  
                  TS03  
City-State-Zip: MIAMI FL 33138

Title            VP  
Name            WARREN, ROBERT  
Address        4000 TOWERSIDE TERR.  
                  APT. 808  
City-State-Zip: MIAMI FL 33138

Title            SECRETARY  
Name            MECHANIC, STEPHEN  
Address        4000 TOWERSIDE TERRACE  
                  APT. 511  
City-State-Zip: MIAMI FL 33138

Title            TREASURER  
Name            MONTGOMERY, ROGER  
Address        2000 TOWERSIDE TERR.  
                  401  
City-State-Zip: MIAMI FL 33138

Title            DIRECTOR  
Name            GROSSMAN, GREGG  
Address        1544 NE QUAYSIDE TERRACE  
City-State-Zip: MIAMI FL 33138

Title            DIRECTOR  
Name            REYES, JORGE  
Address        3006 QUAYSIDE LANE  
City-State-Zip: MIAMI FL 33138

Title            DIRECTOR  
Name            MIZE, ROXY  
Address        1000 QUAYSIDE TERRACE  
                  703  
City-State-Zip: MIAMI FL 33138

Title            DIRECTOR  
Name            TRUJILLO, REINALDO  
Address        2000 TOWERSIDE TERRACE  
                  1907  
City-State-Zip: MIAMI FL 33138

**Continues on page 2**

*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: STEPHEN MECHANIC**

**SECRETARY**

**02/28/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR

Name BREJT, SAM

Address 3004 NE QUAYSIDE LANE

City-State-Zip: MIAMI FL 33138