

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752721

**Entity Name:** POINCIANA ISLAND YACHT AND RACQUET CLUB  
CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**350 POINCIANA IS. DR.  
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**350 POINCIANA IS. DR.  
SUNNY ISLES BEACH, FL 33160 US**FEI Number: 59-2025683****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SKRLD. INC.  
201 ALHAMBRA CIRCLE,  
SUITE 1102  
CORAL GABLES, FL 33134 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	P
Name	CAPRA, GREG
Address	350 POINCIANA ISLAND
City-State-Zip:	SUNNY ISLES FL 33160

Title	VP
Name	CAPLAN, SHEILA
Address	350 POINCIANA IS. DR.
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	DIRECTOR
Name	MAMEME, IZHAK
Address	350 POINCIANA IS. DR.
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	TREASURER
Name	FRIDMAN, YELENA
Address	350 POINCIANA ISLAND DRIVE
City-State-Zip:	SUNNY ISLES FL 33160

Title	D
Name	KHROMIN, EKATERINA
Address	350 POINCIANA ISLAND DR
City-State-Zip:	SUNNY ISLES FL 33160

Title	SECRETARY
Name	FRANCOLLA, IVETTE
Address	350 POINCIANA IS. DR.
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	DERECTOR
Name	FARBER, SANDRA
Address	350 POINCIANA ISLAND DR
City-State-Zip:	SUNNY ISLES BEACH FL 33160

*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: GREG CAPRA****PRESIDENT****03/02/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date