#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757213

Entity Name: GREENWICH ASSOCIATION, INC.

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

12301 SW 132ND CT MIAMI, FL 33186

### **Current Mailing Address:**

12301 SW 132ND CT MIAMI, FL 33186

## FEI Number: 59-2094391

### Name and Address of Current Registered Agent:

LAW OFFICES OF JONATHAN RUBIN 9360 SUNSET DRIVE #220 MIAMI, FL 33173 US

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

| Title           | P                 | Title           | VP                 |
|-----------------|-------------------|-----------------|--------------------|
| Name            | MCVAY, GARY       | Name            | VINALS, SONIA      |
| Address         | 12301 SW 132ND CT | Address         | 12301 SW 132ND CT  |
| City-State-Zip: | MIAMI FL 33186    | City-State-Zip: | MIAMI FL 33186     |
| Title           | S/T               | Title           | D                  |
| Name            | CONDE, ANGELA R   | Name            | CASTRO, OLGA LUCIA |
| Address         | 12301 SW 132ND CT | Address         | 12301 SW 132ND CT  |
| City-State-Zip: | MIAMI FL 33186    | City-State-Zip: | MIAMI FL 33186     |
| Title           | DIRECTOR          | Title           | DIRECTOR           |
| Name            | RIZZO, JOSE       | Name            | DE MELLO, RAFIK    |
| Address         | 12301 SW 132ND CT | Address         | 12301 SW 132ND CT  |
| City-State-Zip: | MIAMI FL 33186    | City-State-Zip: | MIAMI FL 33186     |
|                 |                   |                 |                    |

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: GARY MCVAY

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Mar 03, 2015 Secretary of State CC7196511439

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