DOCUMENT# 758108
Entity Name: WATERVIEW CONDOMINIUM ASSOCIATION, INC. OF AVENTURA
Current Principal Place of Business:

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

20505 E. COUNTRY CLUB DR. AVENTURA, FL 33180

Current Mailing Address:

20505 E. COUNTRY CLUB DR. AVENTURA, FL 33180

FEI Number: 59-2557138

Name and Address of Current Registered Agent:

SKRLD, INC. 201 ALHAMBRA CIRCLE, 11TH FLOOR CORAL GABLES, FL 33134 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 :

Officer/Director Detail :						
Title	DIRECTOR	Title	SEC			
Name	RICOSSA, CHERYL	Name	ALTMAN, LOIS			
Address	20515 E COUNTRY CLUV DR #1542	Address	20515 E. COUNTRY CLUB DR. #2249			
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180			
Title	TREASURER	Title	DIRECTOR			
Name	MUKHIN, VADIM	Name	HAMLIN, FAITH			
Address	20515 E. COUNTRY CLUB DRIVE #847	Address	20515 EAST COUNTRY CLUB DRIVE 1146			
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180			
Title	PRESIDENT	Title	VP			
Name	LEVIEN, JEROME	Name	VAZQUEZ, FELIX			
Address	20505 E COUNTRY CLUB DRIVE 1134	Address	20505 E COUNTRY CLUB DRIVE 832			
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180			
,	AVENTURA PE 33100	ony otate zip.	AVENTURA FL 33100			
Title	DIRECTOR	Title	DIRECTOR			
, ,		2				
Title	DIRECTOR	Title	DIRECTOR			
Title Name	DIRECTOR MOLAN, ROBIN 20505 E COUNTRY CLUB DRIVE	Title Name	DIRECTOR VACCA, ERNEST 20505 E COUNTRY CLUB DRIVE			

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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: LOIS ALTMAN	SECRETARY	01/03/2019
Flastrania Signature of Signing Officer/Director Datail		5.4

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 03, 2019 Secretary of State CC7021967779

Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY
Name	OSLAND, GARY
Address	20505 E. COUNTRY CLUB DR. 1431
City-State-Zip:	AVENTURA FL 33180