### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 760169** 

Entity Name: NINE ISLAND AVENUE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 21, 2014 Secretary of State CC2253739283

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

9 ISLAND AVENUE, BELLE ISLE OFFICE

MIAMI BEACH, FL 33139

# **Current Mailing Address:**

9 ISLAND AVENUE, BELLE ISLE OFFICE MIAMI BEACH, FL 33139

FEI Number: 59-2196288 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, LERNER, DE LA TORRE, MARS & SOBEL, P.A. 201 ALHAMBRA CIRCLE, 11TH FLOOR 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: GARY MARS 04/21/2014

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

 Title
 PRES
 Title
 TREASURER

 Name
 STOKOLS, JEFFERY
 Name
 KOEBERNIK, HEINZ

Address 9 ISLAND AVE. Address 9 ISLAND AVE.

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY Title VP

Name LESNIAK, RENETTA Name BARTON, BRIAN Address 9 ISLAND AVE. Address 9 ISLAND AVE

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title DIR

Name ASHMAWY, YESSIN Address 9 ISLAND AVE

City-State-Zip: MIAMI BEACH FL 33139

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: JEFFERY M. STOKOLS

**PRESIDENT** 

04/21/2014