

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761431

**Entity Name:** JOCKEY CLUB III ASSOCIATION, INC.**Current Principal Place of Business:**11113 BISCAYNE BLVD  
MIAMI, FL 33181**Current Mailing Address:**11113BISCAYNE BLVD  
MIAMI, FL 33181 US**FEI Number:** 59-2157365**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLAXBERG, BARRY  
25 S.E. 2ND AVE  
SUITE 730  
MIAMI, FL 33181 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 DIRECTOR  
Name BURNS, MARILYN  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title PRESIDENT, DIRECTOR  
Name DUDLEY, SPOTTSWOOD  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title SECRETARY, DIRECTOR  
Name LEON, LUIS R  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title DIRECTOR  
Name GABALDON, JUAN  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title VP, DIRECTOR  
Name SINKLE - KOLSKY, DEBRA  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title TREASURER, DIRECTOR  
Name SOUFFRANT, GAMALIEL "NEIL"  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

Title DIRECTOR  
Name STUART, SUSAN  
Address 11113 BISCAYNE BLVD  
"OFFICE"  
City-State-Zip: MIAMI FL 33181

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:** SPOTTSWOOD P. DUDLEY**PRESIDENT****01/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date