

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766415

**Entity Name:** WEST OAKS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**833 WEST AVENUE  
APT 503  
MIAMI BEACH, FL 33139**Current Mailing Address:**833 WEST AVENUE  
APT 503  
MIAMI BEACH, FL 33139**FEI Number:** 59-2472925**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOMEZ, MICHAEL W  
1930 TYLER STREET  
HOLLYWOOD, FL 33020 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	ZERQUERA, NANCY
Address	833 WEST AVE #503
City-State-Zip:	MIAMI BEACH FL 33139

Title	T
Name	AGUILAR, RICHARD
Address	757 NW 27 AVE #204
City-State-Zip:	MIAMI FL 33139

Title	D
Name	CANSECO, MICHELE
Address	833 WEST AVE #201
City-State-Zip:	MIAMI BEACH FL 33139

Title	VP
Name	KARWAN, KEENAN
Address	833 WEST AVE #304
City-State-Zip:	MIAMI BEACH FL 33139

Title	S
Name	DOEBLER, DAVID
Address	833 WEST AVE #404
City-State-Zip:	MIAMI BEACH FL 33139

Title	DIRECTOR
Name	MEZA, LUZ MARIA
Address	833 WEST AVE APT 502
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:** NANCY ZERQUERA**PRESIDENT****03/13/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date