

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770325

**FILED**  
**Jan 20, 2020**  
**Secretary of State**  
**6048020868CC****Entity Name:** OLD CUTLER LAKES BY THE BAY COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**18951 SW 106 AVE  
201  
CUTLER BAY, FL 33157**Current Mailing Address:**18951 SW 106 AVE  
201  
CUTLER BAY, FL 33157 US**FEI Number:** 59-2378225**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BREWER, RICHARD  
9500 S. DADELAND BLVD STE 550  
MIAMI, FL 33190 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:** RICHARD BREWER

01/20/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name TILLOTSON, GAYLE  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title PRESIDENT  
Name SBAR, ILYNE  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title D  
Name TAYLOR, PAULETTE  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title D  
Name NUSSBAUM, SUSAN  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title TREASURER  
Name BREWER, RICHARD  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title DIRECTOR  
Name TAYLOR, CHRISTINE  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title DIRECTOR  
Name PORTELL, AILED  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

Title DIRECTOR  
Name LANFAIR, ERIC  
Address 18951 SW 106 AVE  
201  
City-State-Zip: CUTLER BAY FL 33157

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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:** PAULETTE TAYLOR

DIRECTOR

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	SECRETARY
Name	SOTOLONGO, KATHY
Address	18951 SW 106 AVE 201
City-State-Zip:	CUTLER BAY FL 33157