

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001111

Entity Name: 100 HIDDEN BAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**PROPERTY MANAGEMENT OFFICE
3370 N.E. 190TH STREET
AVENTURA, FL 33180**Current Mailing Address:**PROPERTY MANAGEMENT OFFICE
3370 N.E. 190TH STREET
AVENTURA, FL 33180**FEI Number:** 65-0986009**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAW OFFICES OF CHERYL LEVIN PA
COURTYARD BUSINESS CENTER
4694 NW 103 AVENUE
SUNRISE, FL 33351 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	PRES
Name	RESNICK, ARNOLD
Address	3370 NE 190 ST. # 1508
City-State-Zip:	AVENTURA FL 33180

Title	SECRETARY
Name	ROBINSON, HOWARD DR.
Address	3370 NE 190 ST. # 1807
City-State-Zip:	AVENTURA FL 33180

Title	DIRECTOR
Name	SARRIA, LEO
Address	3370 N.E. 190TH ST. #2612
City-State-Zip:	AVENTURA FL 33180

Title	DIRECTOR
Name	GREENBAUM, STEVE
Address	3370 NE 190TH ST, 807
City-State-Zip:	AVENTURA FL 33180

Title	VP
Name	ROLAND, JOHN
Address	3370 NE 190TH ST, 2108
City-State-Zip:	AVENTURA FL 33180

Title	DIRECTOR
Name	FISCHLER, MARCELLE
Address	3370 N.E. 190TH STREET 2707
City-State-Zip:	AVENTURA FL 33180

Title	DIRECTOR
Name	SCHATZ, ROBERT
Address	3370 NE 190TH STREET 1703
City-State-Zip:	AVENTURA FL 33180

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: ARNOLD RESNICK

PRESIDENT

02/19/2021

Electronic Signature of Signing Officer/Director Detail_____
Date