

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001751

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC5025531055****Entity Name:** VERONA AT DEERING BAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**13627 DEERING BAY DRIVE  
3000  
CORAL GABLES, FL 33158**Current Mailing Address:**13633 DEERING BAY DRIVE  
C/O FIRSTSERVICE RESIDENTIAL, INC. #10  
MIAMI, FL 33158 US**FEI Number:** 59-3632763**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.  
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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	SECRETARY
Name	MAYES, JAMES D
Address	13627 DEERING BAY DR 1204
City-State-Zip:	CORAL GABLES FL 33158

Title	P/D
Name	LEACH, NEIL
Address	13627 DEERING BAY DRIVE 1402
City-State-Zip:	CORAL GABLES FL 33158

Title	T/D
Name	BUCHSBAUM, FRED
Address	13627 DEERING BAY DRIVE 804
City-State-Zip:	CORAL GABLES FL 33158

Title	VP/D
Name	KUHN, ROBERT M
Address	13627 DEERING BAY DRIVE 1404
City-State-Zip:	CORAL GABLES FL 33158

Title	D
Name	SAGE, RICHARD
Address	13627 DAIRY BAY DR 203
City-State-Zip:	MIAMI FL 33158

*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:** NEIL LEACH**PRESIDENT****01/10/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date