

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01002

Entity Name: THE LAKES OF AVALON MASTER ASSOCIATION, INC.

Current Principal Place of Business:

8440 NW 190 TERRACE
MIAMI, FL 33015

Current Mailing Address:

8440 NW 190 TERRACE
MIAMI, FL 33015

FEI Number: 59-2516841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CAMARA, ROSA MESQ.
ALHAMBRA TOWERS, 121 ALHAMBRA PLAZA
SUITE 1000, 10TH 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 PVST
Name HEALY, JOHN FIII
Address 8497 NW 191 STREET
City-State-Zip: MIAMI FL 33015

Title DIRECTOR
Name ARVELO, FRANCISCO
Address 8440 NW 190 TERRACE
City-State-Zip: MIAMI FL 33015

Title DIRECTOR
Name ALZATE, JORGE
Address 8440 NW 190 TERRACE
City-State-Zip: MIAMI FL 33015

Title DIRECTOR
Name RAMIREZ, RICARDO
Address 8440 NW 190 TERRACE
City-State-Zip: MIAMI FL 33015

Title DIRECTOR
Name RAHE, CHRISTINE
Address 8440 NW 190 TERRACE
City-State-Zip: MIAMI FL 33015

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: JOHN F HEALY III

PRESIDENT

03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date