

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N02000009876

**Entity Name:** UNIVERSITY TRAIL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

830 SW 129 AVE  
CLUB HOUSE  
MIAMI, FL 33175

**Current Mailing Address:**

C/O EXCLUSIVE PROPERTY MGMT GROUP, LLC  
175 FOUNTAINEBLEAU BLVD SUITE 2G1  
MIAMI, FL 33172 US

**FEI Number: 57-1150559**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

EXCLUSIVE PROPERTY MANAGEMENT GROUP  
C/O EXCLUSIVE PROPERTY MGMT GROUP, LLC  
175 FOUNTAINEBLEAU BLVD SUITE 2G1  
MIAMI, FL 33172 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: VALENTIN T ESCRIBANO**

**03/19/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           DE LEON , LOUVIS  
Address        C/O EXCLUSIVE PROPERTY MGMT  
                  GROUP, LLC  
                  175 FOUNTAINEBLEAU BLVD SUITE  
                  2G1  
City-State-Zip: MIAMI FL 33172

Title           PRESIDENT  
Name           MEJIAS , DAISY  
Address        C/O EXCLUSIVE PROPERTY MGMT  
                  GROUP, LLC  
                  175 FOUNTAINEBLEAU BLVD SUITE  
                  2G1  
City-State-Zip: MIAMI FL 33172

Title           SECRETARY  
Name           SABINA, SUHAILY  
Address        C/O EXCLUSIVE PROPERTY MGMT  
                  GROUP, LLC  
                  175 FOUNTAINEBLEAU BLVD SUITE  
                  2G1  
City-State-Zip: MIAMI FL 33172

Title           DIRECTOR  
Name           FEIJOO, OBADIS  
Address        C/O EXCLUSIVE PROPERTY MGMT  
                  GROUP, LLC  
                  175 FOUNTAINEBLEAU BLVD SUITE  
                  2G1  
City-State-Zip: MIAMI FL 33172

Title           DIRECTOR  
Name           JORGE, AUCAR  
Address        C/O EXCLUSIVE PROPERTY MGMT  
                  GROUP, LLC  
                  175 FOUNTAINEBLEAU BLVD SUITE  
                  2G1  
City-State-Zip: MIAMI FL 33172

*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: DE LEON , LOUVIS**

**TREASURER**

**03/19/2024**

Electronic Signature of Signing Officer/Director Detail

Date