

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N03000005369

**Entity Name:** SOUTH POINTE COVE CONDOMINIUM ASSOCIATION INC.

**Current Principal Place of Business:**

2510 NW 97TH. AVENUE  
SUITE 200  
DORAL, FL 33172

**Current Mailing Address:**

2510 NW 97TH. AVENUE  
SUITE 200  
DORAL, FL 33172 US

**FEI Number: 75-3171464**

**Certificate of Status Desired: No**

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

MARTINEZ, DANIEL  
2510 NW 97TH. AVENUE  
SUITE 200  
DORAL, 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: DANIEL MARTINEZ**

**08/04/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ARENAS, MICHAEL  
Address 2510 NW 97TH. AVENUE  
SUITE 200  
City-State-Zip: DORAL FL 33172

Title VP  
Name VICTORIANO DE LEON, GILDALINA  
Address 2510 NW 97TH. AVENUE  
SUITE 200  
City-State-Zip: DORAL FL 33172

Title TREA  
Name CHEDIAK, GILBERT A.  
Address 2510 NW 97TH. AVENUE  
SUITE 200  
City-State-Zip: DORAL FL 33172

Title SEC, SECRETARY  
Name MARTINEZ, ROSA  
Address 2510 NW 97TH. AVENUE  
SUITE 200  
City-State-Zip: DORAL FL 33172

Title DIRECTOR  
Name CHRISTMAN, VICTOR  
Address 2510 NW 97TH. AVENUE  
SUITE 200  
City-State-Zip: DORAL 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: MICHAEL ARENAS**

**PRESIDENT**

**08/04/2015**

Electronic Signature of Signing Officer/Director Detail

Date