Entity Name: MAYFAIR VILLAS CONDOMINIUM ASSOCIATION OF MIAMI BEACH, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

824-826 JEFFERSON AVE MIAMI BEACH, FL 33139

Current Mailing Address:

DOCUMENT# N0300008226

C/O AMERICAN PROPERTY MANAGEMENT OF MIAMI BEACH PO BOX 191042 MIAMI BEACH, FL 33119 US

FEI Number: 20-1121536

Name and Address of Current Registered Agent:

AMERICAN PROPERTY MANAGEMENT OF MIAMI BEACH 1370 WASHINGTON AVE. SUITE 203 MIAMI BEACH, FL 33139 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	ANDREA VELAZQUEZ			03/01/2017
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	D, PRESIDENT	Title	D, TREASURER	
Name	TRAUB, TERE	Name	ULLMAN, DAVID C	
Address	824 JEFFERSON AVE #1	Address	826 JEFFERSON AVE #5	
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139	
Title	LCAM	Title	LCAM	
Name	C MANGOLD, KRISTINA	Name	VELAZQUEZ, ANDREA	
Address	PO BOX 191042	Address	PO BOX 191042	
City-State-Zip:	MIAMI BEACH FL 33119	City-State-Zip:	MIAMI BEACH FL 33119	
Title	DIRECTOR, SECRETARY			
Name	FULLER, ERIC			
Address	824 MICHIGAN AVE #3			
City-State-Zip:	MIAMI BEACH FL 33139			

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.

LCAM

SIGNATURE: KRISTINA C MANGOLD

Electronic Signature of Signing Officer/Director Detail

FILED Mar 01, 2017 Secretary of State CC2040165167

Certificate of Status Desired: No

03/01/2017 Date