

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002606

**Entity Name:** PARC CENTRAL AVENTURA SOUTH CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 31, 2013**  
**Secretary of State**  
**CC8296233463**

**Current Principal Place of Business:**

3300 NE 191ST STREET  
MANAGEMENT OFFICE  
AVENTURA, FL 33180

**Current Mailing Address:**

3300 NE 191ST STREET  
MANAGEMENT OFFICE  
AVENTURA, FL 33180

**FEI Number: 26-0110122**

**Certificate of Status Desired: No**

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

SOLOMON, BEN ESQ.  
1666 KENNEDY CAUSEWAY  
3RD FLOOR  
NORTH BAY VILLAGE, FL 33141 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 P  
Name MCMILLAN, GARY  
Address 3300 NE 191 ST APT #511  
City-State-Zip: AVENTURA FL 33180

Title VP  
Name ROSALIE, COSTA  
Address 3300 NE 191ST STREET  
MANAGEMENT OFFICE  
City-State-Zip: AVENTURA FL 33180

Title ST  
Name URUNGU, CHARLES  
Address 3300 NE 191ST STREET  
MANAGEMENT OFFICE  
City-State-Zip: AVENTURA FL 33180

*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: GARY MCMILLAN**

**PRESIDENT**

**01/31/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date