

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003107

**Entity Name:** ARTECITY PARK MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

435 21 STREET  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

435 21 STREET  
MIAMI BEACH, FL 33139 US

**FEI Number:** 26-1161169

**Certificate of Status Desired:** No

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

GOLDSTEIN , JONATHAN  
251 NW 23RD STREET  
MIAMI, FL 33127 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:** JONATHAN GOLDSTEIN

03/31/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CIROCCO, VIRGINIA  
Address        435 21ST STREET SUITE #2  
City-State-Zip: MIAMI BEACH FL 33139

Title            VP  
Name            ARIYANAYAKAM, RAMESH  
Address        435 21ST STREET SUITE #2  
City-State-Zip: MIAMI BEACH FL 33139

Title            SECRETARY  
Name            GRAHAM, THOMAS  
Address        435 21ST STREET SUITE #2  
City-State-Zip: MIAMI BEACH FL 33139

Title            TREASURER  
Name            NATHANIAL, PETER  
Address        435 21ST STREET SUITE #2  
City-State-Zip: MIAMI BEACH FL 33139

Title            DIRECTOR  
Name            GUDAITIS, CHRISTINE  
Address        435 21ST STREET SUITE #2  
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.*

**SIGNATURE:** VIRGINIA CIROCCO

PRESIDENT

03/31/2020

Electronic Signature of Signing Officer/Director Detail

Date