

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

DOCUMENT# N05000003117

**Entity Name:** ARTECITY GOVERNOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

435 21ST STREET  
SUITE #2  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

435 21ST STREET  
SUITE #3  
MIAMI BEACH, FL 33139

**FEI Number:** 26-1161133

**Certificate of Status Desired:** No

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

THE CONTINENTAL GROUP  
2950 N. 28TH TERRACE  
HOLLYWOOD, FL 33020 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 PD  
Name FRANKS, GREGORY  
Address 435 21ST STREET SUITE #3  
City-State-Zip: MIAMI BEACH FL 33139

Title SD  
Name TUTHILL, MATTHEW  
Address 435 21ST STREET SUITE #3  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name BALLESTAS, VICTOR  
Address 435 21ST STREET SUITE #3  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name TORTU, CHRISTOPHER  
Address 435 21ST STREET SUITE #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.

**SIGNATURE:** GREGORY FRANKS

**PRESIDENT**

**05/02/2013**

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

\_\_\_\_\_  
Date