

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

DOCUMENT# N05000008118

**Entity Name:** UPTOWN LOFTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2275 BISCAYNE BLVD.  
MIAMI, FL 33137

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC1600645730**

**Current Mailing Address:**

C/O AAA MANAGEMENT SERVICES, INC.  
P.O. BOX 11981  
MIAMI, FL 33101-1981 US

**FEI Number: 32-0162582**

**Certificate of Status Desired: No**

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

THE TARICH LAW FIRM P.A. JAMIE TARICH  
19495 BISCAYNE BOULEVARD,  
SUITE 606  
AVENTURA, FL 33180 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 CROSBY, MARIA  
Address 2 GROVE ISLE, APT.# 308  
City-State-Zip: MIAMI FL 33133

Title VP  
Name ADELMAN, SHONAGH  
Address 2275 BISCAYNE BLVD. # PH104  
City-State-Zip: MIAMI FL 33137

Title T  
Name HAMILTON, FRED  
Address 2275 BISCAYNE BLVD. # 808  
City-State-Zip: MIAMI FL 33137

Title S  
Name GUERRA, LINNETTE  
Address 2275 BISCAYNE BLVD. # CU-01  
City-State-Zip: MIAMI FL 33137

Title D  
Name PASTOR, MARIANO  
Address 2275 BISCAYNE BLVD. # CU-11  
City-State-Zip: MIAMI FL 33137

*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: MARIA CROSBY**

**PRESIDENT**

**04/23/2015**

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

\_\_\_\_\_  
Date