

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

DOCUMENT# N06000004569

**Entity Name:** SAGE ON LENOX CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1045 LENOX AV  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O FRANMAR MANAGEMENT SERVICES, INC.  
3550 BISCAYNE BLVD. SUITE 210  
MIAMI, FL 33137 US

**FEI Number:** 20-2362845

**Certificate of Status Desired:** No

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

FRANMAR MANAGEMENT SERVICES, INC.  
3550 BISCAYNE BLVD.  
SUITE 210  
MIAMI, FL 33137 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:** FRANK BLANCO

05/01/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RERHRHAYE, ADIL  
Address        3550 BISCAYNE BLVD.  
                  SUITE 210  
City-State-Zip: MIAMI FL 33137

Title            TSD  
Name            MOORE, THOMAS  
Address        3550 BISCAYNE BLVD.  
                  SUITE 210  
City-State-Zip: MIAMI FL 33137

Title            LCAM  
Name            BLANCO, FRANK  
Address        3550 BISCAYNE BLVD.  
                  SUITE 210  
City-State-Zip: MIAMI FL 33137

Title            DIRECTOR  
Name            WHARTON, THOMAS  
Address        3550 BISCAYNE BLVD.  
                  SUITE 210  
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:** ADIL RERHRHAYE

PD

05/01/2015

Electronic Signature of Signing Officer/Director Detail

Date