

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

DOCUMENT# N07000000856

**FILED**  
**Feb 20, 2020**  
**Secretary of State**  
**1137739006CC**

**Entity Name:** ONE FIFTY ONE AT BISCAYNE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

15051 ROYAL OAKS LANE  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

15051 ROYAL OAKS LANE  
NORTH MIAMI, FL 33181

**FEI Number:** 20-8287253

**Certificate of Status Desired:** No

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

PENABAD, CORALEE G  
283 CATALONIA AVE  
SUITE 100  
CORAL GABLES, FL 33134 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           DIRECTOR  
Name           CHAWLA, SURJIT  
Address        14851 ROYAL OAKS LANE  
City-State-Zip: NORTH MIAMI FL 33181

Title           PRESIDENT  
Name           HELLINGER, ANDREW B  
Address        283 CATALONIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title           DIRECTOR  
Name           SILVESTRE, SERGIO  
Address        14851 ROYAL OAKS LANE  
City-State-Zip: NORTH MIAMI FL 33181

Title           DIRECTOR  
Name           SMITH , RUSSELL  
Address        14851 ROYAL OAKS LANE  
City-State-Zip: NORTH MIAMI FL 33181

*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: ANDREW HELLINGER**

**PRINCIPAL**

**02/20/2020**

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

\_\_\_\_\_  
Date