

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010133

Entity Name: THE CENTRAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

928 PENNSYLVANIA AVE.
MIAMI BEACH, FL 33139

Current Mailing Address:

PO BOX 191042
MIAMI BEACH, FL 331191042 US

FEI Number: 26-3734612

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHERMAN, THOMAS G
90 ALMERIA AVE
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	PD	Title	VP, SECRETARY, DIRECTOR
Name	REBOUL, JEAN C	Name	SCEMAMA, JULIEN
Address	7124 SW 47TH STREET	Address	90 ALMERIA AVE
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	CORAL GABLES FL 33134
Title	LCAM	Title	DIRECTOR, TREASURER
Name	C MANGOLD, KRISTINA	Name	OCCELI, COLETTE
Address	PO BOX 191042	Address	928 PENNSYLVANIA AVE
City-State-Zip:	MIAMI BEACH FL 331191042	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: KRISTINA C MANGOLD

LCAM

05/01/2015

Electronic Signature of Signing Officer/Director Detail

Date