

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000004329

**FILED**  
**Feb 11, 2021**  
**Secretary of State**  
**6334671402CC**

**Entity Name:** THE JEFFERSON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

THE JEFFERSON CONDOMINIUM ASSOCIATION INC  
401 JEFFERSON AVENUE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O PMI SUNSHINE STATE  
1680 MICHIGAN AVE SUITE 1001  
MIAMI BEACH, FL 33139 US

**FEI Number: 45-2091206**

**Certificate of Status Desired: No**

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

GONGORA, MICHAEL  
121 ALHAMBRA PLAZA  
BECKER & POLIAKOFF 10TH FLOOR  
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: GONGORA MICHAEL**

**02/11/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ALEXANDRE, STANOVICI  
Address        C/O PMI SUNSHINE STATE  
                  1680 MICHIGAN AVE SUITE 1001  
City-State-Zip: MIAMI BEACH FL 33139

Title            SECRETARY  
Name            SNYDER, RUSSELL  
Address        C/O PMI SUNSHINE STATE  
                  1680 MICHIGAN AVE SUITE 1001  
City-State-Zip: MIAMI BEACH FL 33139

Title            TREASURER  
Name            SHAPIRO, EUGENE  
Address        C/O PMI SUNSHINE STATE  
                  1680 MICHIGAN AVE SUITE 1001  
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: ALEXANDRE STANOVICI**

**PRESIDENT**

**02/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date