

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N11365

**Entity Name:** GREATER MIAMI AVIATION ASSOCIATION, INC.

**Current Principal Place of Business:**

5701 NW 36 ST  
MIAMI, FL 33166

**Current Mailing Address:**

P.O. BOX 660834  
MIAMI, FL 33266 US

**FEI Number:** 59-2694879

**Certificate of Status Desired:** No

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

TZUR, AVIV  
5701 NW 36 ST  
MIAMI, FL 33166 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:** YANELLE M BARINAS

08/02/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TZUR, AVIV  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            1ST VP  
Name            GONZALEZ, NELSON JESUS  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            2ND VP  
Name            PINTO, CARLA  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            3RD VP  
Name            FURLAN, CHRISTOPHER  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            SECRETARY  
Name            ACEVEDO, GIL  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            TREASURER  
Name            AEDO, ANITA  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            DIRECTOR  
Name            WALTER, KONRAD  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title            D  
Name            VASCONCELOS, ADENIA  
Address        5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

**Continues on page 2**

*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:** GIL ACEVEDO

**SECRETARY**

08/02/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name GARCIA, LOURDES  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name GALLAGAN, SEAN  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name REITZ, FREDERICK  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name ROBINET, PATRICE  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name SOKOLOWSKI, VICKY  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title HONORARY MEMBER  
Name LAFORGIA, VITO  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name HENDERSON, MARC  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name GUTIERREZ, SILVIA  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name LARS, POTTS  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name GUERRA, GEORGE  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title D  
Name MURPHY, CAM  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166

Title HONORARY MEMBER  
Name CHRISTENSEN, ROBERT  
Address 5701 NW 36 ST  
City-State-Zip: MIAMI FL 33166