

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 29, 2016
Secretary of State
CC1860723502

Entity Name: AVENTURA ISLES MASTER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10401 DEERWOOD PARK BOULEVARD
SUITE 2130
JACKSONVILLE, FL 32256

Current Mailing Address:

10401 DEERWOOD PARK BOULEVARD
SUITE 2130
JACKSONVILLE, FL 32256 US

FEI Number: 46-2777785

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EVERGREEN LIFESTYLES MANAGEMENT, LLC
10401 DEERWOOD PARK BOULEVARD
SUITE 2130
JACKSONVILLE, FL 32256 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: PATTI FERRIS

02/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name GORDON, DEREK
Address 10401 DEERWOOD PARK BOULEVARD
SUITE 2130
City-State-Zip: JACKSONVILLE FL 32256

Title VPD
Name BERRY, NAOMI
Address 10401 DEERWOOD PARK BOULEVARD
SUITE 2130
City-State-Zip: JACKSONVILLE FL 32256

Title SD
Name COHEN, EDUARDO
Address 10401 DEERWOOD PARK BOULEVARD
SUITE 2130
City-State-Zip: JACKSONVILLE FL 32256

Title TD
Name MACEDO, DIEGO
Address 10401 DEERWOOD PARK BOULEVARD
SUITE 2130
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name BELILTY, NATHALIE
Address 10401 DEERWOOD PARK BOULEVARD
SUITE 2130
City-State-Zip: JACKSONVILLE FL 32256

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: DEREK GORDON

PRESIDENT

02/29/2016

Electronic Signature of Signing Officer/Director Detail

Date