

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N12000010967

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

**FILED
Jul 20, 2015
Secretary of State
CC1506684545**

Current Principal Place of Business:

10401 DEERWOOD PARK BOULEVARD
SUITE 2130
JACKSONVILLE, FL 32256

Current Mailing Address:

605 NE 193RD STREET
MIAMI, FL 33179 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 MCDONALD

07/20/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GORDON, DEREK
Address 605 NE 193RD ST.
City-State-Zip: MIAMI FL 33179

Title VP
Name BERRY, NAOMI
Address 605 NE 193RD ST.
City-State-Zip: MIAMI FL 33179

Title SECRETARY
Name COHEN, EDUARDO
Address 605 NE 193RD ST.
City-State-Zip: MIAMI FL 33179

Title TREASURER
Name MACEDO, DIEGO
Address 605 NE 193RD ST.
City-State-Zip: MIAMI FL 33179

Title DIRECTOR
Name BELITY, NATALIE
Address 605 NE 193RD STREET
City-State-Zip: MIAMI FL 33179

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

07/20/2015

Electronic Signature of Signing Officer/Director Detail

Date