2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000002945

Entity Name: 900 PLACE HOMEOWNER'S ASSOCIATION, INC.

FILED Feb 27, 2024 Secretary of State 1929699652CC

Current Principal Place of Business:

900 NE 4TH ST

FORT LAUDERDALE, FL 33301

Current Mailing Address:

1835 E. HALLANDALE BEACH BLVD GOLDEN BEACH PROPERTY MANAGEMENT SUITE 698

HALLANDALE, FL 33009 US

FEI Number: 86-3612231 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDEN BEACH PROPERTY MANAGEMENT INC. 1835 E. HALLANDALE BEACH BLVD. GOLDEN BEACH PROPERTY MANAGEMENT SUITE 698 HALLANDALE, FL 33009 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: THOMAS BERGAMO 02/27/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title VP Title DIRECTOR

Name SMOLEN, BENJAMIN Name SLUBOWSKY, JERRY

Address 900 NE 4TH ST Address 900 NE 4TH ST

SUITE A3

FORT LAUDERDALE FL 33301 City-State-Zip: FORT LAUDERDALE FL 33301

Title TREASURER Title SECRETARY

Name GEDEON, SABRINA Name BENNET, DOMINIQUE

Address 900 NE 4TH ST Address 900 NE 4TH ST

SUITE A4 SUITE B5

City-State-Zip: FORT LAUDERDALE FL 33301 City-State-Zip: FORT LAUDERDALE FL 33301

TitleDIRECTORTitleDIRECTORNameCHHABRA, ISHPALNameCOVA, HALVORAddress900 NE 4TH STAddress900 NE 4TH ST

SUITE B4 SUITE B6

City-State-Zip: FORT LAUDERDALE FL 33301 City-State-Zip: FORT LAUDERDALE FL 33301

TitleDIRECTORTitlePRESIDENTNameFERREIRA, EDUARDONameRODGERS, JOHNAddress900 NE 4TH STAddress900 NE 4TH ST

SUITE A2 SUITE B1

City-State-Zip: FORT LAUDERDALE FL 33301 City-State-Zip: FORT LAUDERDALE FL 33301

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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: JOHN RODGERS PRESIDENT 02/27/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SOLDATKIN, DMITRY

Address 900 NE 4TH ST

SUITE A5

City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR

Name GIORDANO, DANIELLE

Address 900 NE 4TH ST

SUITE B2

City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name HEN, ELI

Address 900 NE 4TH ST

SUITE A1

City-State-Zip: FORT LAUDERDALE FL 33301