2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 17, 2025
Secretary of State
9163963501CC

DOCUMENT# N23078

Entity Name: HELEN MAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2421-2445 LAKE PANCOAST DRIVE
MIAMI BEACH, FL 33140

Current Mailing Address:

800 VILLAGE SQUARE SQUARE CROSSING
SUITE 211
PALM BEACH GARDENS, FL 33410 US

FEI Number: 22-2988133

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COMPLETE PROPERTY MANAGEMENT
800 VILLAGE SQUARE SQUARE CROSSING
SUITE 211
PALM BEACH GARDENS, FL 33410 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: ROBIN MOORE 03/17/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	ASST. SECRETARY
Name	MCGREGOR, MICHAEL	Name	MOORE, ROBIN
Address	2421-2445 LAKE PANCOAST DRIVE	Address	800 VILLAGE SQUARE SQUARE CROSSING SUITE 211
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	PALM BEACH GARDENS FL 33410
Title	VP	Title	DIRECTOR
Name	LORET DE MOLA, JUAN	Name	LOPEZ, TAMMY
Address	2421-2445 LAKE PANCOAST DRIVE	Address	2421-2445 LAKE PANCOAST DRIVE
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140
Title	DIRECTOR	Title	DIRECTOR
Name	MARZILLI, ANTHONY	Name	BHASIN, RACHNA
Address	2421-2445 LAKE PANCOAST DRIVE	Address	2421-2445 LAKE PANCOAST DRIVE
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140
Title	DIRECTOR	Title	DIRECTOR
Name	HINDIS, MARKOS	Name	WEINBERG, REBECCA
Address	2421-2445 LAKE PANCOAST DRIVE	Address	2421-2445 LAKE PANCOAST DRIVE
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140

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: ROBIN MOORE CPM 03/17/2025

Electronic Signature of Signing Officer/Director Detail — Date