

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23577

**FILED**  
**Apr 07, 2024**  
**Secretary of State**  
**0948162092CC**

**Entity Name:** THE GABLES II TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GOLD PROPERTY MANAGEMENT & ASSOCIATES, INC  
10887 NW 17 STREET SUITE 202  
MIAMI, FL 33172

**Current Mailing Address:**

C/O GOLD PROPERTY MANAGEMENT & ASSOCIATES INC  
10887 NW 17 ST SUITE 202  
MIAMI, FL 33172 US

**FEI Number: 65-0031457**

**Certificate of Status Desired: No**

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

ACUNA, ALBERT  
782 N.W.42ND AVENUE  
SUITE 350  
MIAMI, FL 33126 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: ALBERT ACUNA**

**04/07/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ROUCO, DANIA  
Address        C/O GOLD PROPERTY MANAGEMENT  
                 & ASSOCIATES, INC  
                 10887 NW 17 ST SUITE 202  
City-State-Zip: MIAMI FL 33172

Title            TREASURER  
Name            DOPAZO, STELLA MARIS  
Address        C/O GOLD PROPERTY MANAGEMENT  
                 & ASSOCIATES, INC  
                 10887 NW 17 ST SUITE 202  
City-State-Zip: MIAMI FL 33172

Title            SECRETARY  
Name            SANTANA, ESPANA DEL PILAR  
Address        C/O GOLD PROPERTY MANAGEMENT  
                 & ASSOCIATES, INC  
                 10887 NW 17 ST SUITE 202  
City-State-Zip: MIAMI FL 33172

Title            VP  
Name            JOVET , EDGARDO  
Address        C/O GOLD PROPERTY MANAGEMENT  
                 & ASSOCIATES, INC  
                 10887 NW 17 ST SUITE 202  
City-State-Zip: MIAMI FL 33172

Title            DIRECTOR  
Name            ALVARADO, CARMENZA  
Address        C/O GOLD PROPERTY MANAGEMENT  
                 & ASSOCIATES, INC  
                 10887 NW 17 ST SUITE 202  
City-State-Zip: MIAMI FL 33172

*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: DANIA ROUCO**

**P**

**04/07/2024**

Electronic Signature of Signing Officer/Director Detail

Date