

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33307

**Entity Name:** THE CARRIAGE CLUB NORTH CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 10, 2017**  
**Secretary of State**  
**CC9486949185**

**Current Principal Place of Business:**

5005 COLLINS AVENUE  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

5005 COLLINS AVENUE  
MIAMI BEACH, FL 33140 US

**FEI Number: 65-0128840**

**Certificate of Status Desired: No**

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

JOSHUA D. KRUT ESQ.  
200 E. PALMETTO PARK ROAD  
#103  
BOCA RATON, FL 33432 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name SKLAR, JOEL  
Address 5005 COLLINS AVE  
MANAGEMENT OFFICE  
City-State-Zip: MIAMI BEACH FL 33140  
  
Title T  
Name ELLIOTT, LYNNETTE  
Address 5005 COLLINS AVE.,  
MANAGEMENT OFFICE  
City-State-Zip: MIAMI BEACH FL 33140

Title P  
Name EPSTEIN, MARTIN  
Address 5005 COLLINS AVE.,  
MANAGEMENT OFFICE  
City-State-Zip: MIAMI BEACH FL 33140  
  
Title DIRECTOR  
Name LEVENBROWN, JACK DR.  
Address 5005 COLLINS AVENUE  
MANAGEMENT OFFICE  
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: MARTIN EPSTEIN**

**PRESIDENT**

**04/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date