

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000149

Entity Name: HUGHES COVE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3314 DEVON CT.
MIAMI, FL 33133**Current Mailing Address:**C/O SOLSTICE RESIDENTIAL SOUTH, LLC
13248 SW 8TH STREET ATTENTION: KEVIN HOGAN, COO
MIAMI, FL 33184 US**FEI Number:** 65-0462389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOLSTICE RESIDENTIAL SOUTH, LLC
C/O SOLSTICE RESIDENTIAL SOUTH, LLC
13248 SW 8TH STREET ATTENTION: KEVIN HOGAN, COO
MIAMI, FL 33184 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:** CHRIS PACE

07/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	PACE, CHRISTOPHER R
Address	3314 DEVON CT.
City-State-Zip:	MIAMI FL 33133

Title	VP
Name	PACE, REAGAN
Address	3314 DEVON CT.
City-State-Zip:	MIAMI FL 33133

Title	TREASURER
Name	MIGOYA, CARLOS
Address	3314 DEVON CT.
City-State-Zip:	MIAMI FL 33133

Title	SECRETARY
Name	NUNBERG, JEFFREY
Address	3314 DEVON CT.
City-State-Zip:	MIAMI FL 33133

Title	DIRECTOR
Name	PEREZ, DARLENE
Address	3314 DEVON CT.
City-State-Zip:	MIAMI FL 33133

Title	CEO, ASST. SECRETARY
Name	KALAJIAN, ALEX
Address	SOLSTICE RESIDENTIAL SOUTH, LLC 55 BROAD STREET
City-State-Zip:	NEW YORK NY 10004

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: ALEX KALAJIAN

CEO

07/21/2020

Electronic Signature of Signing Officer/Director Detail

Date