## 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000003635

Entity Name: FLORIDA TOWER CONDOMINIUM ASSOCIATION, INC.

**FILED** Dec 08, 2017 **Secretary of State** CC1184436912

## **Current Principal Place of Business:**

6422 COLLINS AVE MANAGER OFFICE MIAMI BEACH, FL 33141

# **Current Mailing Address:**

6422 COLLINS AVE MANAGER OFFICE MIAMI BEACH, FL 33141 US

FEI Number: 65-0628532 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

LOZANO, RAFAEL LCAM 6422 COLLINS AVE MANAGEMENT OFFICE MIAMI BEACH, FL 33141 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: RAFAEL LOZANO, LCAM 12/08/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

City-State-Zip:

City-State-Zip:

Title PRESIDENT Title **TREASURER** Name GAMBON, THRESIA B Name CARTER, TONI 6422 COLLINS AVE 6422 COLLINS AVE Address Address

**OFFICE OFFICE** 

MIAMI BEACH FL 33141 City-State-Zip: MIAMI FL 33141

Title Title S

Name FERNANDEZ, SECUNDINO Name ALONSO, MARCUS

Address 6422 COLLINS AVE Address 6422 COLLINS AVE

**OFFICE OFFICE** 

City-State-Zip:

MIAMI BEACH FL 33141

Title **DIRECTOR** 

MIAMI FL 33141

HOYO, LISSETTE Name

6422 COLLINS AVE Address **OFFICE** 

City-State-Zip: MIAMI BEACH FL 33141

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.