## 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000000420

Entity Name: SILVER GARDENS CONDOMINIUM ASSOCIATION, INC.

**FILED** Sep 04, 2019 **Secretary of State** 6447883322CC

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

C/O NEW HORIZONS PROPERTY MGMT. SOLUTIONS, LLC 14411 COMMERCE WAY SUITE 316

HIALEAH, FL 33016

## **Current Mailing Address:**

C/O NEW HORIZONS PROPERTY MGMT. SOLUTIONS, LLC 14411 COMMERCE WAY SUITE 316 HIALEAH, FL 33016 US

FEI Number: 65-0480644 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NEW HORIZONS PROPERTY MGMT. SOLUTIONS, LLC 14411 COMMERCE WAY SUITE 316 MIAMI LAKES, FL 33016 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: DAVID MENENDEZ 09/04/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title **PRESIDENT** 

Name PACHECO, WILFREDO Name SANTANA, HECTOR

14411 COMMERCE WAY 14411 COMMERCE WAY Address Address

> **SUITE 316 SUITE 316**

City-State-Zip: HIALEAH FL 33016 City-State-Zip: HIALEAH FL 33016

Title **TREASURER** Title **SECRETARY** 

Name FERNANDEZ, JOSUE Name ALVAREZ, JEAN

Address 14411 COMMERCE WAY Address 14411 COMMERCE WAY **SUITE 316 SUITE 316** 

City-State-Zip:

HIALEAH FL 33016

Title DIRECTOR

City-State-Zip:

CAJIGAS, JACQUELINE Name Address

HIALEAH FL 33016

14411 COMMERCE WAY **SUITE 316** 

City-State-Zip: HIALEAH FL 33016

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.

09/04/2019 SIGNATURE: HECTOR SANTANA **PRESIDENT** 

Date