

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90015 032 ****61.25

DOCUMENT # 751652

1. Entity Name
TIDES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
3824 N.E. 166 ST.
NO MIAMI BCH, FL 33160

Mailing Address
3824 N.E. 166 ST.
NO MIAMI BCH, FL 33160



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03032004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-0856194

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ACEVEDO, CECILIA M
3800 NE 166 STREET
NORTH MIAMI BEACH, FL 33160

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Cecilia M. Acevedo, President

2-28-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ACEVEDO, CELILIA
STREET ADDRESS 3814 NE 166 STREET
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33160

TITLE TD ☐ Delete
NAME DUGGAN, BARBARA
STREET ADDRESS 3814 NE NOLE ST
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33160

TITLE SD ☒ Delete
NAME JACKSON, CHRIS
STREET ADDRESS 3762 NE 166 ST
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE VPD ☒ Delete
NAME SALMERON, JESSE
STREET ADDRESS 3156 NE 166 ST
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME *Secretary*
STREET ADDRESS *SHANA Horner*
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME *Vice President*
STREET ADDRESS *Russ Brunetto*
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Cecilia M. Acevedo, President *2-28-04*

(305) 944-1714