

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012788

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** BAYVIEW PALMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1800 & 1805 SANS SOUCI BLVD.  
N. MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

1805 SANS SOUCI BLVD.  
MANAGEMENT OFFICE  
N.MIAMI, FL 33181

**New Mailing Address:**

**FEI Number:** 20-5092099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSOCIATION LAW GROUP, P.L.  
1666 KENNEDY CAUSEWAY  
SUITE 305  
NORTH BAY VILLAGE, FL 33141 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GABRIS, JOSEPH  
Address: 1800 SANS SOUCI BLVD # 231  
City-St-Zip: NORTH MIAMI, FL 33181

Title: VP  
Name: ISRAEL, GRUNSTEIN  
Address: 1800 SAN SOUCI BLVD # 234  
City-St-Zip: NORTH MIAMI, FL 33181

Title: S  
Name: OLGA, LUZURIAG  
Address: 1800 SAN SOUCI BLVD, #240  
City-St-Zip: N MIAMI, FL 33181

Title: T  
Name: FIALLOS, OSCAR  
Address: 696 NE 125 ST  
City-St-Zip: N MIAMI BCH, F 33161 FL

Title: D  
Name: FUENTES, IVAN  
Address: 3850 BIRD ROAD STE 800  
City-St-Zip: MIAMI, FL 33146

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: JOSEPH GABRIS

PRES

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date