

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000293

FILED  
Mar 02, 2012  
Secretary of State

**Entity Name:** 18101 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

18101 COLLINS AVE  
MANAGEMENT OFFICE  
SUNNY ISLES BCH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

18101 COLLINS AVE  
MANAGEMENT OFFICE  
SUNNY ISLES BCH, FL 33160

**New Mailing Address:**

**FEI Number:** 20-3036288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
C207  
FORT LAUDERDALE, FL 33312 US

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

BECKER & POLIAKOFF, P.A.  
3111 STIRLING ROAD  
FORT LAUDERDALE, FL 33312 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 ROGEL

03/02/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GUIDO, GARY  
**Address:** 18101 COLLINS AVE  
**City-St-Zip:** SUNNY ISLES BCH, FL 33160

**Title:** VPD  
**Name:** MCCLELLAND, ROBERT  
**Address:** 18101 COLLINS AVE  
**City-St-Zip:** SUNNY ISLES BCH, FL 33160

**Title:** SD  
**Name:** DEZER, GIL  
**Address:** 18101 COLLINS AVE  
**City-St-Zip:** SUNNY ISLES BCH, FL 33160

**Title:** D  
**Name:** DE LIMA, MARTHA  
**Address:** 18101 COLLINS AVE  
**City-St-Zip:** SUNNY ISLES BEACH, FL 33160

**Title:** TD  
**Name:** KOSSON, LEONARD  
**Address:** 18101 COLLINS AVE  
**City-St-Zip:** SUNNY ISLES BEACH, FL 33009

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:** GARY GUIDO

PD

03/02/2012

Electronic Signature of Signing Officer or Director

Date