

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002097

FILED
Apr 30, 2012
Secretary of State

Entity Name: EUCLID MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1540 EUCLID AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS
PO BOX 191042
MIAMI BEACH, FL 33119 US

New Mailing Address:

FEI Number: 65-0494721 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS
1370 WASHINGTON AVE.
SUITE 203
MIAMI BEACH, FL 33139 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: DP
Name: RISSIOTIS, JULIE
Address: 1540 EUCLID AVE. # 201
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS
Name: WEERSING, CARL
Address: 4130 NE 20TH AVE.
City-St-Zip: OAKLAND PARK, FL 33308

Title: CAM
Name: MANGOLD, KRISTINA
Address: PO BOX 191042
City-St-Zip: MIAMI BEACH, FL 33119

Title: D
Name: RODRIGUEZ, AL
Address: 1540 EUCLID AVE., #103
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT
Name: GRANT, RICK
Address: 141 A WASHINGTON AVE.
City-St-Zip: BROOKLYN, NY 11205

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: KRISTINA MANGOLD

CAM

04/30/2012

Electronic Signature of Signing Officer or Director

_____ Date