## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 712111** 

Entity Name: SIXTH MOORINGS CONDOMINIUM, INC.

Apr 29, 2014 **Secretary of State** CC1740947879

Date

**FILED** 

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

18555 N.E. 14TH AVENUE

NORTH MIAMI BEACH, FL 33179

## **Current Mailing Address:**

18555 N.E. 14TH AVENUE

NORTH MIAMI BEACH, FL 33179

FEI Number: 59-1204711 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KOBLE, JOHN 18555 NE 14 AVE N MIAMI BEACH, FL 33179 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: JOHN KOBLE 04/29/2014

Electronic Signature of Registered Agent

Title

**TREASURER** 

Officer/Director Detail:

Title Title **PRESIDENT** 

KUSHNER-RENTZER, INA KOBLE, JOHN Name Name 18555 NE 14 AVENUE Address

18555 NE 14 AVE STE Address 702B

NORTH MIAMI FL 33179

City-State-Zip: City-State-Zip: NORTH MIAMI FL 33179

Title VΡ

SESSEGO, QUINTO Name Name GUIDO, CAMILLA

Address 18555 NE 14TH AVENUE. 18555 NORTHEAST 14 AVE, Address 620

N MIAMI FL 33179 City-State-Zip: City-State-Zip: NORTH MIAMI FL 33179

Title DIRECTOR

Title **DIRECTOR** Name PRADO, FRANCISCO

Name PRADO, FRANCISCO Address 18555 NE 14TH AVENUE

Address 18555 NE 14TH AVENUE 605 605

N MIAMI BEACH FL 33179 City-State-Zip: City-State-Zip: N MIAMI BEACH FL 33179

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.

04/29/2014 SIGNATURE: JOHN KOBLE **PRESIDENT**