

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714011

**FILED**  
**Apr 01, 2016**  
**Secretary of State**  
**CC1889736328**

**Entity Name:** FIRST GULFSTREAM GARDEN APARTMENTS CONDOMINIUM, INC.

**Current Principal Place of Business:**

FIRST GULFSTREAM GARDEN APT. CONDO  
215 SE 3RD AVE. - OFFICE 4TH FLOOR  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

FIRST GULFSTREAM GARDEN APT. CONDO  
215 SE 3RD AVE. - OFFICE 4TH FLOOR  
HALLANDALE BEACH, FL 33009 US

**FEI Number: 59-1237172**

**Certificate of Status Desired: Yes**

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

KAYE BENDER REMBAUM P.L.  
1200 PARK CENTRAL BLVD. SOUTH  
SOUTH POMPANO, FL , FL 33064 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: ANDREW BLACK**

**04/01/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, TREASURER  
Name            CRUZ, EVELYN  
Address        215 SE 3RD AVE. #103A  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            VP  
Name            SURRETTE, JAMES  
Address        215 SE 3RD AVE. # 202A  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SECRETARY  
Name            TERMINI, VINCENZA  
Address        215 SE 3RD AVE. #102B  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            POLANCO, RAYMOND  
Address        215 SE 3RD AVE. #103D  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            GONZALEZ, JOE  
Address        215 SE 3RD AVE. #501A  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            TORO, RENE  
Address        215 S.E. THIRD AVE  
                  UNIT 108D  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            ARENA, GIOVANNI  
Address        215 SE 3 AVE, #406C  
City-State-Zip: HALLENDALE 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: EVELYN CRUZ**

**PRESIDENT**

**04/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date