2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714011

Entity Name: FIRST GULFSTREAM GARDEN APARTMENTS CONDOMINIUM,

INC.

FILED
Mar 05, 2024
Secretary of State
6278512749CC

Current Principal Place of Business:

215 S.E. 3RD AVENUE 4TH FLOOR - OFFICE

HALLANDALE BEACH, FL 33009

Current Mailing Address:

215 SE 3RD AVENUE 4TH FLOOR - OFFICE

HALLANDALE BEACH, FL 33009 US

FEI Number: 59-1237172 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLANDER, GOODE & LOPEZ, PLLC 314 S. FEDERAL HIGHWAY DANIA BEACH, FL 33004 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: MATTHEW GOODE 03/05/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT & TREASURER Title VICE PRESIDENT

Name NEWMAN, MARCIA Name LALA, ANTHONY

Address 215 S.E. 3RD AVENUE Address 215 S.E. 3RD AVENUE

4TH FLOOR - OFFICE 4TH FLOOR - OFFICE

HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY Title DIRECTOR

Name MURPHY, DINA Name HOWARTH, PAULINE

Address 215 S.E. 3RD AVENUE Address 215 S.E. 3RD AVENUE

4TH FLOOR - OFFICE 4TH FLOOR - OFFICE

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR Title DIRECTOR

Name POLANCO, REYMOUNDO Name THRALLS, KARLENE

Address 215 S.E. 3RD AVENUE Address 215 S.E. 3RD AVENUE 4TH FLOOR - OFFICE 4TH FLOOR - OFFICE

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name CORBISCELLO, NICHOLAS

Address 215 SE 3RD AVENUE

4TH FLOOR - OFFICE

City-State-Zip: HALLANDALE 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: MARCIA NEWMAN PRESIDENT 03/05/2024