

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714011

FILED
Mar 28, 2015
Secretary of State
CC2751891627

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: No

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

03/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title VP
Name TORO, RENE
Address 215 SE 3RD AVE. # 108-C
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER
Name MC SOLEY, MARY M
Address 215 SE 3RD AVE. #501-D
City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY
Name MC SOLEY, MARY M
Address 215 SE 3RD AVE. #501-D
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name KARASEK, ROBERT
Address 215 SE 3RD AVE. #303-D
City-State-Zip: HALLANDALE BEACH FL 33009

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

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

Title DIRECTOR
Name TERMINI, VINCENZA
Address 215 S.E. THIRD AVE
 UNIT 102B
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: JOE GONZALEZ

PRESIDENT

03/28/2015

Electronic Signature of Signing Officer/Director Detail

Date