2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729695

Entity Name: ISLAND TERRACE CONDOMINIUM ASSOCIATON, INC.

FILED
Apr 28, 2015
Secretary of State
CC2034975902

Current Principal Place of Business:

5 ISLAND AVENUE MANAGEMENT OFFICE MIAMI, FL 33139

Current Mailing Address:

5 ISLAND AVENUE MANAGEMENT OFFICE MIAMI, FL 33139 US

FEI Number: 59-1704505 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RANDALL , ROGER K 621 NW 53RD ST 300

BOCA RATON, FL 33487 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: RANDALL ROGER 04/28/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title OFFICER Title VP

Name PARKER, KUNAL Name ZUR, THOMAS

Address 5 ISLAND AVENUE Address 5 ISLAND AVENUE MANAGEMENT OFFICE MANAGEMENT OFFICE

MIAMI FL 33139 City-State-Zip: MIAMI FL 33139

Title OFFICER Title TREASURER

Name KNIGHT, JENNIFER K Name NEUSTEDTER, RICHARD

Address 5 ISLAND AVENUE Address 5 ISLAND AVENUE

MANAGEMENT OFFICE MANAGEMENT OFFICE

City-State-Zip: MIAMI FL 33139 City-State-Zip: MIAMI FL 33139

Title DIRECTOR Title PRESIDENT

NameTRACY, MONICANameROBBINS, JACKAddress5 ISLAND AVENUEAddress5 ISLAND AVE

MANAGEMENT OFFICE MANAGEMENT OFFICE

City-State-Zip: MIAMI FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY Title OFFICER

Name LEE, RUSSELL Name BASSEL, ALEXANDRA

Address 5 ISLAND AVE Address 5 ISALND AVE

MANAGEMENT OFFICE

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Continues on page 2

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: JACK ROBBINS PRESIDENT 04/28/2015

MANAGEMENT OFFICE

Officer/Director Detail Continued:

Title OFFICER

Name ABADILLA, IAN

Address 5 ISLAND AVE

5 ISLAND AVE MANAGEMENT OFFICE

City-State-Zip: MIAMI BEACH FL 33139