

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 744107

**Entity Name:** COUNTRY CLUB OF MIAMI 44 NORTH ASSOCIATION, INC.

**Current Principal Place of Business:**

5901 NW 151 ST  
SUITE 100  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

5901 NW 151 ST  
SUITE 100  
MIAMI LAKES, FL 33014 US

**FEI Number:** 59-2116397

**Certificate of Status Desired:** No

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

TOP SERVICE PROPERTY MANAGEMENT LLC  
5901 NW 151 ST  
SUITE 100  
MIAMI LAKES, FL 33014 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:** ROBERTO CORRIPIO

04/14/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEE, KEN  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            D  
Name            PALLERO, FRANCISCO  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            VP  
Name            MACHADO, ORLANDO  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            FARINETTI, FLORA  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            GEMMELL, JOHN A  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            HIDALGO, ERNESTO E.  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            NUTTER, BILLIE S.  
Address        5901 NW 151 STREET  
                 SUITE 100  
City-State-Zip: MIAMI LAKES FL 33014

*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:** KEN LEE

**PRESIDENT**

04/14/2021

Electronic Signature of Signing Officer/Director Detail

Date