

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749088

**Entity Name:** GABLES WATERWAY TOWERS ASSOCIATION, INC.

**Current Principal Place of Business:**

90 EDGEWATER DRIVE  
CORAL GABLES, FL 33133

**Current Mailing Address:**

90 EDGEWATER DRIVE  
CORAL GABLES, FL 33133 US

**FEI Number: 59-2015509**

**Certificate of Status Desired: No**

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

SKRLD INC.  
201 ALHAMBRA CIRCLE  
11TH FLOOR  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           RYDER, NORMA  
Address        90 EDGEWATER DRIVE  
                  APT 1104  
City-State-Zip: CORAL GABLES FL 33133

Title           DIRECTOR  
Name           CHEN, VINCENT  
Address        90 EDGEWATER DRIVE  
City-State-Zip: CORAL GABLES FL 33133

Title           SECRETARY  
Name           CAMPBELL, MELISSA  
Address        90 EDGEWATER DRIVE  
City-State-Zip: CORAL GABLES FL 33133

Title           DIRECTOR  
Name           RAMIREZ, JORGE  
Address        90 EDGEWATER DRIVE  
City-State-Zip: CORAL GABLES FL 33133

Title           TREASURER  
Name           ROTHSTEIN, PETER  
Address        90 EDGEWATER DRIVE  
City-State-Zip: CORAL GABLES FL 33133

Title           VP  
Name           REICH, OTTO  
Address        90 EDGEWATER DR  
                  #926  
City-State-Zip: CORAL GABLES FL 33133

*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: NORMA RYDER**

**PRESIDENT**

**01/24/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date