

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751934

Entity Name: DELVISTA TOWERS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**20225 NE 34 CT
MANAGEMENT OFFICE
AVENTURA, FL 33180**Current Mailing Address:**20225 NE 34 CT
MANAGEMENT OFFICE
AVENTURA, FL 33180**FEI Number:** 59-2229662**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DELVISTA TOWERS CONDO ASSOC
20225 NE 34 CT
MANAGEMENT OFFICE
AVENTURA, FL 33180 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:** MARVIN LEOVITZ

02/22/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GOLDFEIN, REGINA
Address 20355 NE 34TH COURT # 1428
City-State-Zip: AVENTURA FL 33180

Title VP
Name BRAUN, MARK
Address 20355 NE 34 CT #1628
City-State-Zip: AVENTURA FL 33180

Title TREASURER
Name RUDNICK, LOUISE
Address 20355 NE 34 CT. #829
City-State-Zip: AVENTURA FL 33180

Title PRESIDENT
Name LEOVITZ, MARVIN
Address 20225 NE 34 CT. #1518
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name FIEGLER, MARCOS
Address 20355 NE 34TH CT
City-State-Zip: AVENTURA FL 33180

Title SECRETARY
Name LESHEM, GADI
Address 20255 NE 34 CT # 2722
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name CLARK, CATHY
Address 20225 NE 34 CT
MANAGEMENT OFFICE
City-State-Zip: AVENTURA FL 33180

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: MARVIN LEOVITZ

PRESIDENT

02/22/2018

Electronic Signature of Signing Officer/Director Detail

Date