

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 758114

Entity Name: 200 LESLIE CONDOMINIUM ASSOCIATION, INC.

FILED
May 05, 2015
Secretary of State
CC5627923246

Current Principal Place of Business:

200 LESLIE DR
LOWER LOBBY MGMT. OFFICE
HALLANDALE BEACH, FL 33009

Current Mailing Address:

200 LESLIE DR
LOWER LOBBY MGMT. OFFICE
HALLANDALE BEACH, FL 33009 US

FEI Number: 59-2134818

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRUT, JOSHUA D. ESQ.
C/O WEISS SEROTA HELFMAN COLE BIERMAN & POPOK, P.L.
200 EAST BROWARD BOULEVARD SUITE 1900
FORT LAUDERDALE, FL 33301 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: JOSHUA D. KRUT

05/05/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PIEDRA, WANDA
Address 200 LESLIE DR
 LOWER LOBBY MGMT. OFFICE
City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY
Name PINOCHET, LUIS A.
Address 200 LESLIE DR
 LOWER LOBBY MGMT. OFFICE
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER
Name RIVERON, MERCEDES
Address 200 LESLIE DR
 LOWER LOBBY MGMT. OFFICE
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name LENCOVSKI, MARCOS
Address 200 LESLIE DR
 LOWER LOBBY MGMT. OFFICE
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name JAWOR, NORMA
Address 200 LESLIE DR
 LOWER LOBBY MGMT. OFFICE
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: WANDA PIEDRA

PRESIDENT

05/05/2015

Electronic Signature of Signing Officer/Director Detail

Date