

**2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 771290

**Entity Name:** CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "10" ASSOCIATION, INC.

**FILED**  
**Jan 03, 2023**  
**Secretary of State**  
**8703103713CR**

**Current Principal Place of Business:**

801 N E 199 ST  
#203  
MIAMI, FL 33179

**Current Mailing Address:**

PO BOX 296  
HALLANDALE, FL 33009-0296 US

**FEI Number: 59-2378232**

**Certificate of Status Desired: No**

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

CARMEL AT THE CALIFORNIA CLUB CONDO10 ASSOCIATION INC  
801 NE 199 ST  
203  
MIAMI, FL 33179 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: GABRIEL MOSS**

**01/03/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MOSS, GABRIEL E  
Address        PO BOX 296  
City-State-Zip: HALLANDALE FL 33009-0296

Title            VP  
Name            AVILA, HENRY  
Address        PO BOX 296  
City-State-Zip: HALLANDALE FL 33009-0296

Title            S/T  
Name            DE ARMAS TROWSDALE, REINA  
Address        PO BOX 296  
City-State-Zip: HALLANDALE FL 33009-0296

Title            DIRECTOR  
Name            GIUSEPPE, MAURICI  
Address        PO BOX 296  
City-State-Zip: HALLANDALE FL 33009-0296

Title            DIRECTOR  
Name            BRADY, DOUGLAS A  
Address        PO BOX 296  
City-State-Zip: HALLANDALE FL 33009-0296

*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: GABRIEL E MOSS**

**P**

**01/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date