

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006976

Entity Name: CORAL GABLES NEIGHBORS ASSOCIATION, INC.**Current Principal Place of Business:**6830 GRATIAN ST
CORAL GABLES, FL 33146**Current Mailing Address:**P.O BOX 430825
SOUTH MIAMI, FL 33243-0825 US**FEI Number:** 65-1148228**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAWALERSKI, SUSAN
6830 GRATIAN STREET
CORAL GABLES, FL 33146 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:** SUSAN KAWALERSKI

04/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name KAWALERSKI, SUSAN
Address 6830 GRATIAN ST
City-State-Zip: CORAL GABLES FL 33146

Title VTD
Name REGISTER, DEBRA D
Address 1240 PLACETAS AVENUE
City-State-Zip: CORAL GABLES FL 33146

Title D
Name NOLAN, PATRICK
Address 915 ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33146

Title SD
Name KELLNER, LEON B
Address 1036 S GREENWAY DRIVE
City-State-Zip: CORAL GABLES FL 33134

Title D
Name GILLIS, BRETT
Address 915 FERDINAND STREET
City-State-Zip: CORAL GABLES FL 33134

Title D
Name BERLIN, JIM R
Address 737 TIBIDABO AVENUE
City-State-Zip: CORAL GABLES FL 33143

Title D
Name CRUZ, MARIA
Address 1447 MILLER ROAD
City-State-Zip: CORAL GABLES FL 33146

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: DEBRA D REGISTERVICE
PRESIDENT/TREASURER

04/29/2021

Electronic Signature of Signing Officer/Director Detail

Date