#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003257

Entity Name: AVIGNON IN THE GABLES CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 06, 2019
Secretary of State
0162928005CC

### **Current Principal Place of Business:**

14275 SW 142 AVE MIAMI. FL 33186

## **Current Mailing Address:**

14275 SW 142 AVE MIAMI, FL 33186

FEI Number: 03-0443650 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

REHR, MICHAEL 9500 S DADELAND BOULEVARD SUITE #550 MIAMI, FL 33156 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:

**PRESIDENT** Title Title **TREASURER** Name GOMEZ, ANDY Name FRIEDMAN, ALLAN Address 14275 SW 142 AVE Address 14275 SW 142 AVE City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

Title SECRETARY Title VP

NameJACOBSON, ROBERTNameMIQUILARENA, CARLOSAddress14275 SW 142 AVEAddress14275 SW 142 AVECity-State-Zip:MIAMI FL 33186City-State-Zip:MIAMI FL 33186

Title DIRECTOR Title **DIRECTOR** Name FALCON, TERESITA Name PARADA, JUAN Address 14275 SW 142 AVE Address 14275 SW 142 AVE City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

Title DIRECTOR

Name CARLSON, SHARON
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

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: ANDY GOMEZ PRESIDENT 03/06/2019