## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005624

Entity Name: MARY BRICKELL VILLAGE OWNERS ASSOCIATION, INC.

FILED
May 02, 2023
Secretary of State
7501015767CC

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

19 WEST 44TH STREET, SUITE 1002 NEW YORK. NY 10036

## **Current Mailing Address:**

20750 CIVIC CENTER DRIVE, SUITE 310 SOUTHFIELD, MI 48076 US

FEI Number: 20-3859698 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: SANDRA ZWIJACK, ASSISTANT SECRETARY 05/02/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title CFO

Name HARPER, BRIAN Name FITZMAURICE, MICHAEL

Address 19 WEST 44TH STREET, SUITE 1002 Address 19 WEST 44TH STREET, SUITE 1002

City-State-Zip: NEW YORK NY 10036 City-State-Zip: NEW YORK NY 10036

Title DIRECTOR Title DIRECTOR

Name WALSH, SAM Name COLLIER, TIMOTHY

Address 19 WEST 44TH STREET, SUITE 1002 Address 19 WEST 44TH STREET, SUITE 1002

City-State-Zip: NEW YORK NY 10036 City-State-Zip: NEW YORK NY 10036

Title SENIOR VICE PRESIDENT

Name SHARI, THAKADY

Address 19 WEST 44TH STREET, SUITE 1002

City-State-Zip: NEW YORK NY 10036

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: THAKADY SHARI SENIOR VICE PRESIDENT 05/02/2023