## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007809

Entity Name: THE PENINSULA CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 06, 2017 **Secretary of State** CC8103507596

Date

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

3201 NE 183RD STREET AVENTURA, FL 33160

## **Current Mailing Address:**

**3201 NE 183RD STREET** AVENTURA, FL 33160

FEI Number: 20-0431399 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MANSFIELD BRONSTEIN, PA 3440 HOLLYWOOD BOULEVARD, SUITE 450 HOLLYWOOD, FL 33021 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:

Date Electronic Signature of Registered Agent

#904

Officer/Director Detail :

PRESIDENT/ DIRECTOR Title Title VICE PRESIDENT / DIRECTOR MOSES, LISA WAGNER-ALEYANIS, SUSIE Name Name

3201 NE 183 STREET Address 3201 NE 183RD STREET Address #607

#1004

City-State-Zip: NORTH MIAMI BEACH FL 33160 City-State-Zip: NORTH MIAMI BEACH FL 33160

Title TREASURER/ OFFICER Title DIRECTOR

Name ROCK, ALAN Name MANSFIELD, GARY

3201 NE 183 STREET 3201 NE 183 STREET Address Address

#1106

City-State-Zip: NORTH MIAMI BEACH FL 33160 City-State-Zip: NORTH MIAMI BEACH FL 33160

Title SECRETARY / DIRECTOR Title **DIRECTOR** Name ABITBOL, ALBERT Name HERTZ, LEE

Address **3201 NE 183RD STREET** Address **3201 NE 183RD STREET** 

#1807 #2301

City-State-Zip: AVENTURA FL 33160 City-State-Zip: AVENTURA FL 33160

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.

04/06/2017 SIGNATURE: ALBERT ABITBOL SECRETARY