

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006951

Entity Name: AKOYA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**6365 COLLINS AVENUE
MIAMI BEACH, FL 33141**Current Mailing Address:**6365 COLLINS AVENUE
MIAMI BEACH, FL 33141**FEI Number:** 16-1709768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA
10TH FLR
CORAL GABLES, FL 33141 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 :**

Title	T
Name	MAYOR, REYNALDO
Address	6365 COLLINS AVE #1602
City-State-Zip:	MIAMI BEACH FL 33141

Title	DIR
Name	RODRIGUEZ, OROSMAN
Address	6365 COLLINS AVE #1803
City-State-Zip:	MIAMI BEACH FL 33141

Title	PD
Name	FITELL, BRUCE
Address	6365 COLLINS AVE #2303
City-State-Zip:	MIAMI BEACH FL 33141

Title	SEC
Name	BUIJS, DENNIS
Address	6365 COLLINS AVE #3809
City-State-Zip:	MIAMI BEACH FL 33141

Title	VP
Name	ROTH, MATTHEW
Address	6365 COLLINS AVE #TS 3
City-State-Zip:	MIAMI BEACH FL 33414

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: BRUCE FITELL

PRESIDENT

01/15/2014

Electronic Signature of Signing Officer/Director Detail_____
Date