## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004623

Entity Name: ARBOR KEYS CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 26, 2024
Secretary of State
4342076708CC

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

C/O NEXT GENERATION MANAGEMENT SERVICES, LLC 4501 TREEHOUSE LANE TAMARAC, FL 33319

## **Current Mailing Address:**

ARBOR KEYS CONDOMINIUM ASSOCIATION, INC. C/O NEXT GENERATION MANAGEMENT 13790 NW 4TH ST, SUITE 102 SUNRISE, FL 33325 US

FEI Number: 20-3470840 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JOHN PAUL ARCIA, P.A. 175 S.W. 7TH STREET SUITE 2000 MIAMI, FL 33130 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: JOHN PAUL ARCIA 03/26/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT Title VP

Name GONZALEZ, IRIS Name RESTREPO, ROBINSON

Address C/O NEXT GENERATION Address C/O NEXT GENERATION MANAGEMENT SERVICES, LLC MANAGEMENT SERVICES, LLC

4501 TREEHOUSE LANE 4501 TREEHOUSE LANE

TAMARAC FL 33319 City-State-Zip: TAMARAC FL 33319

Title TREASURER Title SECRETARY

Name DUBITZKY, AARON Name LIBMAN, WAYNE

Name DUBITZKY, AARON Name LIBMAN, WAYNE

Address C/O NEXT GENERATION Address C/O NEXT GENERATION

MANAGEMENT SERVICES, LLC MANAGEMENT SERVICES, LLC

4501 TREEHOUSE LANE 4501 TREEHOUSE LANE

City-State-Zip: TAMARAC FL 33319 City-State-Zip: TAMARAC FL 33319

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.