

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000469

**FILED**  
**May 08, 2017**  
**Secretary of State**  
**CC3120524735**

**Entity Name:** THE OAKS AT MIAMI GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5600 SW 135 AVENUE  
SUITE 108  
MIAMI, FL 33183

**Current Mailing Address:**

5600 SW 135 AVENUE  
SUITE 108  
MIAMI, FL 33183 US

**FEI Number: 59-3698563**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SOUTH FLORIDA PROPERTY MANAGEMENT AND CONSULTANTS, LLC  
5600 SW 135 AVENUE  
SUITE 108  
MIAMI, FL 33183 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: NERY PEREZ-VALDES**

**05/08/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name WILLIAMS, GREG  
Address 5600 SW 135 AVENUE  
SUITE 108  
City-State-Zip: MIAMI FL 33183

Title DIRECTOR  
Name BOAKYE, EBENEZER  
Address 5600 SW 135 AVENUE  
SUITE 108  
City-State-Zip: MIAMI FL 33183

Title VP  
Name BUSEY, BRIAN  
Address 5600 SW 135 AVENUE  
SUITE 108  
City-State-Zip: MIAMI FL 33183

Title SECRETARY  
Name DERCHI, MARTIN  
Address 5600 SW 135 AVENUE  
SUITE 108  
City-State-Zip: MIAMI FL 33183

Title TREASURER  
Name DERCHI, GASTON  
Address 5600 SW 135 AVENUE  
SUITE 108  
City-State-Zip: MIAMI FL 33183

*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: GREG WILLIAMS**

**PRESIDENT**

**05/08/2017**

Electronic Signature of Signing Officer/Director Detail

Date