

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002124

**Entity Name:** MAJORCA ISLES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

9620 GRIFFIN ROAD  
COOPER CITY, FL 33328

**Current Mailing Address:**

9620 GRIFFIN ROAD  
COOPER CITY, FL 33328 US

**FEI Number:** 20-5425637

**Certificate of Status Desired:** No

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

MIRZA BASULTO & ROBBINS, LLP  
14160 PALMETTO FRONTAGE ROAD  
SUITE 22  
MIAMI LAKES, FL 33016 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 D  
Name DUFFIS-SJOGREN, OSMOND  
Address 9620 GRIFFIN ROAD  
City-State-Zip: COOPER CITY FL 33328

Title D  
Name JEROME, BERRY  
Address 9620 GRIFFIN ROAD  
City-State-Zip: COOPER CITY FL 33328

Title D  
Name HAYNIE, ASHLEY  
Address 9620 GRIFFIN ROAD  
City-State-Zip: COOPER CITY FL 33328

Title D  
Name TAMIR, OFER  
Address 9620 GRIFFIN ROAD  
City-State-Zip: COOPER CITY FL 33328

Title D  
Name BENJAMIN, RAYMOND  
Address 9620 GRIFFIN ROAD  
City-State-Zip: COOPER CITY FL 33328

*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:** OFER TAMIR

D

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date