

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

DOCUMENT# N06000002643

**Entity Name:** WASHINGTON POINTE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jun 12, 2017**  
**Secretary of State**  
**CC4056886797**

**Current Principal Place of Business:**

324 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O MAXWELL MANAGEMENT CORPORATION  
1521 ALTON ROAD 703  
MIAMI BEACH, FL 33139 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

MAXWELL MANAGEMENT CORPORATION  
1521 ALTON ROAD  
703  
MIAMI BEACH, FL 33139 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:** EDNA MAXWELL

06/12/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TD/P	Title	DIRECTOR
Name	O'NEAL, DYLAN	Name	COHN, FEDERICK
Address	19 HARVARD ROAD	Address	324 WASHINGTON AVENUE
City-State-Zip:	SHOREHAM NY 11786	City-State-Zip:	MIAMI BEACH FL 33155
Title	TREASURER, SECRETARY		
Name	CORSO, JON		
Address	324 WASHINGTON AVENUE		
City-State-Zip:	MIAMI BEACH FL 33139		

*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:** JON CORSO

**TREASURER/SECRETARY 06/12/2017**

Electronic Signature of Signing Officer/Director Detail

Date