

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000594

**FILED**  
**Apr 24, 2014**  
**Secretary of State**  
**CC3968517030**

**Entity Name:** BLOCK 4B ASSOCIATION, INC.

**Current Principal Place of Business:**

1111 BRICKELL AVENUE  
SUITE 1100  
MIAMI, FL 33131

**Current Mailing Address:**

1111 BRICKELL AVENUE  
SUITE 1100  
MIAMI, FL 33131 US

**FEI Number:** 20-8325509

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT, DIRECTOR  
Name            PETRICOLA, JOHN  
Address        1111 BRICKELL AVENUE  
                  SUITE 1100  
City-State-Zip: MIAMI FL 33131

Title            SECRETARY, TREASURER,  
                  DIRECTOR  
Name            HAMANN, NICOLAS  
Address        1111 BRICKELL AVENUE  
                  SUITE 1100  
City-State-Zip: MIAMI FL 33131

Title            VP, DIRECTOR  
Name            BROWN, WILLIAM  
Address        1111 BRICKELL AVENUE  
                  SUITE 1100  
City-State-Zip: MIAMI FL 33131

*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:** JOHN PETRICOLA

**PRESIDENT, DIRECTOR**

**04/24/2014**

Electronic Signature of Signing Officer/Director Detail

Date