

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003230

FILED
Apr 30, 2019
Secretary of State
3620327258CC

Entity Name: MAJORCA ISLES III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASSOCIATION SPECIALTY GROUP LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024

Current Mailing Address:

C/O ASSOCIATION SPECIALTY GROUP LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024 US

FEI Number: 20-8707900

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOGEN, MICHAEL
C/O THE BOGEN LAW GROUP, P.A.
7351 WILES RD SUITE 202
CORAL SPRINGS, FL 33067 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: BOGEN, MICHAEL

04/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SMITH , DWAYNE
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title VICE PRESIDENT
Name JEAN-LOUIS, GERTRUDE
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title SECRETARY
Name BLACKSHEAR, TZARADELL
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title TREASURER
Name EMILCAR, CARL
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name ESPINO , HENRY
Address C/O ASSOCIATION SPECIALTY
 GROUP LLC
 9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

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: SMITH , DWAYNE

PRESIDENT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date