

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

DOCUMENT# N07000008788

**Entity Name:** GABLES WATERWAY TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 28, 2014**  
**Secretary of State**  
**CC0160956605**

**Current Principal Place of Business:**

4807 UNIVERSITY DRIVE  
CORAL GABLES, FL 33146

**Current Mailing Address:**

4807 UNIVERSITY DRIVE  
CORAL GABLES, FL 33146

**FEI Number: 26-1724299**

**Certificate of Status Desired: Yes**

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

BALOYRA, JOSE L  
5835 BLUE LAGOON DR SUITE 302  
MIAMI, FL 33126 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 P  
Name MORERA, RALPH  
Address 4807 UNIVERSITY DRIVE  
City-State-Zip: CORAL GABLES FL 33146

Title VP  
Name DEVAUX, PETER  
Address 4815 UNIVERSITY DRIVE  
City-State-Zip: CORAL GABLES FL 33146

Title SECRETARY  
Name ESPINOSA, CARLOS  
Address 4807 UNIVERSITY DRIVE  
City-State-Zip: CORAL GABLES FL 33146

*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: RALPH MORERA**

**PRESIDENT**

**01/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date