

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

DOCUMENT# N07000008875

**Entity Name:** 55 MERRICK CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC3594339845**

**Current Principal Place of Business:**

55 MERRICK WAY  
MANAGEMENT OFFICE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

55 MERRICK WAY  
MANAGEMENT OFFICE  
CORAL GABLES, FL 33134

**FEI Number: 26-0881973**

**Certificate of Status Desired: No**

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
#1102  
CORAL GABLES, FL 33134 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 VP  
Name ESTRELLA, DAVID  
Address 55 MERRICK WAY  
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY/TREASURER  
Name ALVAREZ, CARLOS  
Address 55 MERRICK WAY  
519  
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT  
Name MENENDEZ-HERMIDA, AURORA C  
Address 55 MERRICK WAY  
City-State-Zip: CORAL GABLES FL 33134

*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: ESTRELLA, DAVID**

**VP**

**03/20/2014**

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

\_\_\_\_\_  
Date