

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009943

**Entity Name:** MONA LISA AT CELEBRATION CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC5431738456**

**Current Principal Place of Business:**

225 CELEBRATION PLACE  
CELEBRATION, FL 34747

**Current Mailing Address:**

225 CELEBRATION PLACE  
CELEBRATION, FL 34747 US

**FEI Number:** 30-0474580

**Certificate of Status Desired:** No

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

CT 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 DIRECTOR, PRESIDENT  
Name TEJEDA, ALVARO  
Address 800 BRICKELL AVENUE; STE. 1000  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, SECRETARY  
Name BAEZ, ANTONIO  
Address 800 BRICKELL AVE  
SUITE 1000  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, TREASURER  
Name AGUILAR, EDUARDO  
Address 800 BRICKELL AVE SUITE 1000  
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:** ALVARO TEJEDA

**PRESIDENT**

**03/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date