

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011085

**Entity Name:** 500 BRICKELL MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

55 SE 6TH STREET  
MIAMI, FL 33131

**FILED**  
**Mar 26, 2024**  
**Secretary of State**  
**7389412946CC**

**Current Mailing Address:**

8200 NW 33RD STREET  
SUITE 300  
MIAMI, FL 33122 US

**FEI Number:** 26-2368016

**Certificate of Status Desired:** No

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

GURSKY RAGAN, PA.  
141 NE 3RD AVENUE  
FIFTH FLOOR  
MIAMI, FL 33132 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:** MARNIE DALE RAGAN

03/26/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KAPLAN, CASEY  
Address        55 SE 6TH STREET  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            RAGSDALE, ALAN EDWARD  
Address        55 SE 6TH STREET  
City-State-Zip: MIAMI FL 33131

Title            VP  
Name            SCHIMMEL, ANDREW  
Address        55 SE 6TH STREET  
City-State-Zip: MIAMI FL 33131

Title            SECRETARY  
Name            MOLA, MARTIN  
Address        55 SE 6TH STREET  
                  UNIT 1104  
City-State-Zip: MIAMI FL 33131

Title            TREASURER  
Name            GROSMAN, STEPHANIE  
Address        55 SE 6TH STREET  
                  UNIT 1104  
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:** CASEY KAPLAN

PRESIDENT

03/26/2024

Electronic Signature of Signing Officer/Director Detail

Date