2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07034

Entity Name: HAVEN APARTMENTS CONDOMINIUM ASSOCIATION, INC.

FILED Jan 23, 2020 **Secretary of State** 3241849133CC

Current Principal Place of Business:

% BOARDOF DIRECTORS 10250 W. BAY HARBOR DR. BAY HARBOR ISLANDS, FL 33154

Current Mailing Address:

% BOARDOF DIRECTORS 10250 W. BAY HARBOR DR. BAY HARBOR ISLANDS, FL 33154 US

FEI Number: 59-0931605 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARRERO, MAURICE 10250 W. BAY HARBOR DR #3E

BAY HARBOR ISLES, FL 33154 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:

Name

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title D

Name BARRERO, MAURICE Name TRONSCO, RODOLFO

10250 W. BAY HARBOR DR % BOARDOF DIRECTORS Address Address 10250 W. BAY HARBOR DR. 2H

City-State-Zip: MIAMI BEACH FL 33154

City-State-Zip: BAY HARBOR ISLANDS FL 33154

Title Title **DIRECTOR** PINTO, LUIS FERNANDO

Name GHILARDI, VONNI D 10250 W BAY HARBOR DR. Address

% BOARDOF DIRECTORS Address

10250 W. BAY HARBOR DR. BAY HARBOR ISLANDS FL 33154

City-State-Zip: BAY HARBOR ISLANDS FL 33154

Title **DIRECTOR**

ROBINSON, HELENA Name

% BOARDOF DIRECTORS Address

10250 W. BAY HARBOR DR.

City-State-Zip: BAY HARBOR ISLANDS FL 33154

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.

01/23/2020 SIGNATURE: VONNI GHILARDI TREASURER