

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002466

**Entity Name:** ONE SEVENTEEN PROFESSIONAL ARTS CENTER  
CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Feb 28, 2020**  
**Secretary of State**  
**5088962630CC**

**Current Principal Place of Business:**

8200 SW 117 AVENUE  
MIAMI, FL 33183

**Current Mailing Address:**

C/O PROPERTY KEEPERS MANAGEMENT, LLC  
1350 NE 56TH STREET SUITE 180  
FORT LAUDERDALE, FL 33334 US

**FEI Number: 26-2564453**

**Certificate of Status Desired: No**

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

HABER LAW, P.A.  
251 NW 23 STREET  
MIAMI, FL 33127 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: HABER LAW**

**02/28/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ROSS, MICHAEL L DR.  
Address        C/O PROPERTY KEEPERS  
                  MANAGEMENT, LLC  
                  1350 NE 56TH STREET SUITE 180  
City-State-Zip: FORT LAUDERDALE FL 33334

Title            VP  
Name            MORALES, PEDRO DR.  
Address        C/O PROPERTY KEEPERS  
                  MANAGEMENT, LLC  
                  1350 NE 15TH STREET SUITE 180  
City-State-Zip: FORT LAUDERDALE FL 33334

Title            SECRETARY, TREASURER  
Name            REYNOLDS, KILEY DR.  
Address        C/O PROPERTY KEEPERS  
                  MANAGEMENT, LLC  
                  1350 NE 56TH STREET SUITE 180  
City-State-Zip: FORT LAUDERDALE FL 33334

*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: DR. MICHAEL L. ROSS**

**PRESIDENT**

**02/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date