

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008638

Entity Name: 1600 PONCE OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1600 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

Current Mailing Address:

C/O FIRSTSERVICE RESIDENTIAL
5805 BLUE LAGOON DRIVE, SUITE 310
MIAMI, FL 33126 US

FEI Number: 26-3432525

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 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 PD
Name TIEN, YIFE
Address C/O FIRSTSERVICE RESIDENTIAL
5805 BLUE LAGOON DRIVE, SUITE
310
City-State-Zip: MIAMI FL 33126

Title VP
Name HERNANDEZ, MARIANELA
Address C/O FIRSTSERVICE RESIDENTIAL
5805 BLUE LAGOON DRIVE, SUITE
310
City-State-Zip: MIAMI FL 33126

Title T/S
Name HORSLEY, CHRISTIAN
Address C/O FIRSTSERVICE RESIDENTIAL
5805 BLUE LAGOON DRIVE, SUITE
310
City-State-Zip: MIAMI FL 33126

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: YIFE TIEN

PRESIDENT

04/22/2014

Electronic Signature of Signing Officer/Director Detail

_____ Date