

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N13676

Entity Name: FISHER ISLAND COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

ONE FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109

Current Mailing Address:

ONE FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109 US

FEI Number: 65-0004587

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEYTON BOLIN, PL
3343 W. COMMERCIAL BLVD
SUITE 100
FORT LAUDERDALE, FL 33309 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 PRESIDENT
Name SOSA, ROBERTO
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title VP
Name VON HANAU, HEINRICH
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title TREASURER
Name REID, MARK
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title SECRETARY
Name MARKS, LAUREN
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name RYAN, LEE ANN
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name GAVIDIA, NICANOR
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name HOROWITZ, JEFFREY
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name SMITH, STAN
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

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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: ROBERTO SOSA

PRESIDENT

11/09/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FERRARO, JAMES L.
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name DENAIN, CEDRIK
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name ASHKIN, MICHAEL
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DIRECTOR
Name DRURY, ARCHIE
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109