

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000008005

Entity Name: APEX AT PARK CENTRAL NEIGHBORHOOD ASSOCIATION, INC.**FILED**
Jan 21, 2025
Secretary of State
9792284347CC**Current Principal Place of Business:**8195 NW 104TH AVE
DORAL, FL 33178**Current Mailing Address:**8200 NW 41ST ST
SUITE 200
DORAL, FL 33166 US**FEI Number: 81-3583178****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ASSOCIATION LAW GROUP, P.L.
1200 BRICKELL AVE., PH 200
MIAMI, FL 33131 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	FOX, JAMES
Address	8200 NW 41 ST STE 200
City-State-Zip:	DORAL FL 33166

Title	TREASURER
Name	PINTO, ELIZABETH
Address	8200 NW 41 ST STE 200
City-State-Zip:	DORAL FL 33166

Title	DIRECTOR
Name	POLANCO, ARTURO
Address	8200 NW 41 ST STE 200
City-State-Zip:	DORAL FL 33166

Title	DIRECTOR
Name	MARTINEZ, LAZARO
Address	8200 NW 41 ST STE 200
City-State-Zip:	DORAL FL 33166

Title	SECRETARY
Name	ISSA, NINA T
Address	8200 NW 41 ST STE 200
City-State-Zip:	DORAL FL 33166

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: JAMES FOX**PRESIDENT****01/21/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date