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: ISAAC MATZ

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N17112

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: HOMEOWNERS ASSOCIATION OF ALLISON, INC.

Current Principal Place of Business:

6525 ALLISON RD. MIAMI BEACH, FL 33141

Current Mailing Address:

2742 BISCAYNE BLVD MIAMI, FL 33137 US

FEI Number: 65-0027637

Name and Address of Current Registered Agent:

BELOFF, JONATHAN 6525 ALLISON RD. MIAMI BEACH, FL 33141 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

Officer/Director Detail :

Title	PD	Title	VPD
Name	BELOFF, JONATHAN	Name	SCHWARTZ, ROBERT
Address	6525 ALLISON ROAD	Address	6360 ALLISON RD.
City-State-Zip:	MIAMI BEACH FL	City-State-Zip:	MIAMI BEACH FL
Title	STD		
Name	ISAAC, MATZ		
Address	6550 ALLISON ROAD		
City-State-Zip:	MIAMI BEACH FL		

Certificate of Status Desired: No

FILED Jan 09, 2017 Secretary of State CC1302106671

01/09/2017

Date

Date

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