

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24190

Entity Name: MYSTIC POINTE CONDOMINIUM NO. ONE ASSOCIATION, INC.

FILED
Jan 04, 2021
Secretary of State
1754945164CC

Current Principal Place of Business:

3600 MYSTIC POINTE DR.
AVENTURA, FL 33180

Current Mailing Address:

3600 MYSTIC POINTE DR.
AVENTURA, FL 33180

FEI Number: 65-0023832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RHONDA HOLLANDER, P.A.
314 SOUTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004 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: RHONDA HOLLANDER, P.A.

01/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name DENNIS, LANDSBERG
Address 3600 MYSTIC POINTE DRIVE
1915
City-State-Zip: AVENTURA FL 33180

Title PRESIDENT
Name BROWN, ALAN T
Address 3600 MYSTIC POINTE DRIVE
901
City-State-Zip: AVENTURA FL 33180

Title SECRETARY
Name SABAN, JOEY
Address 3600 MYSTIC POINTE DRIVE
1704
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name DEROSI, FABRIZIO
Address 3600 MYSTIC POINTE DRIVE
301
City-State-Zip: AVENTURA FL 33180

Title TREASURER
Name PERLSTEIN, MYRON
Address 3600 MYSTIC POINTE DRIVE
118
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name LOPEZ, SAM
Address 3600 MYSTIC POINTE DRIVE
317
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name LARRAMENDI, MARITZA
Address 3600 MYSTIC POINTE DRIVE
1108
City-State-Zip: AVENTURA FL 33180

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: ALAN BROWN

PRESIDENT

01/04/2021

Electronic Signature of Signing Officer/Director Detail

Date