### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24191

Entity Name: MYSTIC POINTE MASTER ASSOCIATION, INC.

FILED
Apr 27, 2021
Secretary of State
0250179476CC

# **Current Principal Place of Business:**

3595 MYSTIC POINTE DRIVE AVENTURA, FL 33180

## **Current Mailing Address:**

3595 MYSTIC POINTE DRIVE AVENTURA, FL 33180

FEI Number: 65-0023891 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SKRLD, INC. 201 ALHAMBRA CIRCLE 11TH FLOOR 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: MICHAEL HYMAN, ESQ. 04/27/2021

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title VP Title SECRETARY

Name SCHACHNER, SEYMOUR Name GRUNDSTEIN, STEVE

Address 3595 MYSTIC POINTE DRIVE Address 3595 MYSTIC POINTE DRIVE

City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

Title DIRECTOR Title TREASURER

Name LOSZYNSKI, MITCHELL Name CARTER, RANDY

Address 3595 MYSTIC POINTE DRIVE Address 3595 MYSTIC POINTE DRIVE

City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

Title DIRECTOR Title DIRECTOR

Name FORD, ROBERT E. Name ITZKOFF, MARC

Address 3595 MYSTIC POINTE DRIVE Address 3595 MYSTIC POINTE DRIVE

City-State-Zip: AVENTURA FL 33180 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: SCHACHNER, SEYMOUR

**VICE-PRESIDENT** 

04/27/2021