

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N32058

Entity Name: CARRIAGE CLUB SOUTH CONDOMINIUM ASSOCIATION, INC.

**FILED
Jul 20, 2018
Secretary of State
CC6300008666**

Current Principal Place of Business:

5001 COLLINS AVE
MIAMI BEACH, FL 33140

Current Mailing Address:

5001 COLLINS AVE
MANAGEMENT OFFICE
MIAMI BEACH, FL 33140 US

FEI Number: 65-0124848

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

N/A
5001 COLLINS AVENUE
MIAMI BEACH, FL 33140 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: NA

07/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name JOHN, RICUPERO
Address 5001 COLLINS AVE UNIT 10J
City-State-Zip: MIAMI BEACH FL 33140

Title VP
Name GINZBURG, ENRIQUE
Address 5001 COLLINS AVE UNIT 2K
City-State-Zip: MIAMI BEACH FL 33140

Title PRESIDENT
Name WINKLER, THOMAS
Address 5001 COLLINS AVE UNIT 12F
City-State-Zip: MIAMI BEACH FL 33140

Title SECRETARY
Name CASTILLO-MINA, RAQUEL A
Address 5001 COLLINS AVE UNIT 5C
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name NACHUM, SHERMAN
Address 5001 COLLINS AVE UNIT 12D
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name GREENBERG, VALERIE
Address 5001 COLLINS AVE UNIT 12H
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name ROBERT VEGH, ELI
Address 5001 COLLINS AVE UNIT 6B
City-State-Zip: MIAMI BEACH FL 33140

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: THOMAS VWINKLER

PRESIDENT

07/20/2018

Electronic Signature of Signing Officer/Director Detail

Date