## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32058

Entity Name: CARRIAGE CLUB SOUTH CONDOMINIUM ASSOCIATION, INC.

**FILED** Feb 03, 2022 **Secretary of State** 9378161548CC

## **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

Certificate of Status Desired: No FEI Number: 65-0124848

## Name and Address of Current Registered Agent:

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: JAID ABDELAZIZ 02/03/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

VΡ Title **PRESIDENT** Title

Name WINKLER, THOMAS Name GINZBURG, ENRIQUE Address 5001 COLLINS AVE Address 5001 COLLINS AVE City-State-Zip: MIAMI BEACH FL 33140 City-State-Zip: MIAMI BEACH FL 33140

**TREASURER** Title **SECRETARY** Title

Name CASTILLO-MINA, RAQUEL A RICUPERO, JOHN Name

5001 COLLINS AVE Address 5001 COLLINS AVE Address

City-State-Zip: MIAMI BEACH FL 33140 City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR Title DIRECTOR

GREENBERG, VALERIE Name Name OHEVSHALOM, ARMAN Address 5001 COLLINS AVE 5001 COLLINS AVE Address City-State-Zip: MIAMI BEACH FL 33140

MIAMI BEACH FL 33140 City-State-Zip:

Title **DIRECTOR** 

Name ROBERT VEGH, ELI Address 5001 COLLINS AVE

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.

02/03/2022 SIGNATURE: WINKLER, THOMAS ASSOCIATION **PRESIDENT** 

Date