

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35724

FILED
Jan 17, 2024
Secretary of State
9793238587CC

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

Current Principal Place of Business:

19101 MYSTIC POINTE DRIVE
TOWER 200
AVENTURA, FL 33180

Current Mailing Address:

19101 MYSTIC POINTE DRIVE
TOWER 200
AVENTURA, FL 33180 US

FEI Number: 65-0160847

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACHTERMAN, STEVEN M. ESQ.
2655 LE JEUNE ROAD
PENTHOUSE 1-H
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: STEVEN LACHTERMAN

01/17/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SMITH KRESEL, DONNA
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 110
City-State-Zip: AVENTURA FL 33180

Title VP
Name MOSSERI, SALOMON
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 1812
City-State-Zip: AVENTURA FL 33180

Title SECRETARY
Name PORTELL, YAZMIN
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 2209
City-State-Zip: AVENTURA FL 33180

Title T
Name SUSLOV, ALEXANDER
Address 19101 MYSTIC POINTE DRIVE
2207
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name BENJAMINI, LONDA
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 712
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name TEDESCO, ANTHONY
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 2903
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name KONSTANTINIDIS, ANESTIS
Address 19101 MYSTIC POINTE DRIVE
TOWER 200 1909
City-State-Zip: AVENTURA FL 33180

Title OTHER
Name GUERRA, LAURA
Address 19101 MYSTIC POINTE DRIVE
OFFICE
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: DONNA SMITH KRESEL

PRESIDENT

01/17/2024

Electronic Signature of Signing Officer/Director Detail

Date