2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35724

Entity Name: MYSTIC POINTE CONDOMINIUM NO. THREE ASSOCIATION,

INC.

Jan 14, 2015 Secretary of State CC5261662590

FILED

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:

REINHARD, SANFORD N. 1290 WESTON ROAD SUITE 201 WESTON, FL 33326 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:

City-State-Zip:

City-State-Zip:

Name

Electronic Signature of Registered Agent Date

D

Officer/Director Detail:

Title PD Title VP

Name FREEMAN, MAURICE Name NEWFIELD, CAROL VP

Address 19101 MYSTIC POINTE DR #2501 Address 19101 MYSTIC POINTE DRIVE #1711

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

Title OFFICER Title T

Name BENJAMINI, LONDA Name FELDMAN, ARNOLD

Address 19101 MYSTIC POINTE DR Address 19101 MYSTIC POINTE DRIVE #1101

#712 City-State-Zip: AVENTURA FL 33180

Title DIRECTOR ...

Name DAVIS, BARRY

Address 19101 MYSTIC PORT DRIVE#3108
Address 19101 MYSTIC PORT DRIVE#3108

2903 City-State-Zip: AVENTURA FL 33180

Titl DIDECTOR

Title DIRECTOR

Address 19101 MYSTIC POINTE DRIVE

TOWER 200 3008

WOODRUFF, DAN

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: MAURICE FREEMAN PRESIDENT 01/14/2015