2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37856

Entity Name: CLAIREMONT VILLAGE, A CONDOMINIUM, INC.

FILED
Jan 10, 2015
Secretary of State
CC2770583913

Current Principal Place of Business:

2050 N.E. 140 ST., #10

NORTH MIAMI BEACH, FL 33181

Current Mailing Address:

2050 N.E. 140 ST., #10

NORTH MIAMI BEACH. FL 33181 US

FEI Number: 65-0266184 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PHILLIPS, SUSANNE 2050 N.E. 140 ST., #10

NORTH MIAMI BEACH, FL 33181 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:

Electronic Signature of Registered Agent

Date

2050 N.E. 140 ST, #10

Officer/Director Detail:

TitleDIRECTORTitleTREASURERNameSTRACKMAN, KENNamePHILLIPS, SUSANNE

Address 2050 N.E. 140 ST, #8 Address

City-State-Zip: NORTH MIAMI BEACH FL 33181 City-State-Zip: NORTH MIAMI BEACH FL 33181

Title PRESIDENT Title VP

 Name
 MESTRE, JOHN
 Name
 MONTIEL, ALEJANDRO

 Address
 2050 N.E 140 ST. #6
 Address
 2050 N.E. 140 ST, #22

City-State-Zip: NORTH MIAMI BEACH FL 33181 City-State-Zip: NORTH MIAMI BEACH FL 33181

PROPERTY MANAGER Title Title **SECRETARY** Name SAVINE, CLAUDIA Name ARMSTRONG, AMALIA Address P.O. BOX 800408 2050 N.E. 140 ST #5 Address City-State-Zip: AVENTURA FL 33280 NORTH MIAMI BEACH FL 33181 City-State-Zip:

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: CLAUDIA SAVINE PROPERTY MANAGER

Electronic Signature of Signing Officer/Director Detail

01/10/2015 Date