

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41945

FILED
Apr 17, 2015
Secretary of State
CC7069486731

Entity Name: MYSTIC POINTE TOWER 500 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3530 MYSTIC POINTE DR.
AVENTURA, FL 33180

Current Mailing Address:

C/O CASTLE MANAGEMENT
12270 SW 3RD STREET 200
PLANTATION, FL 33325 US

FEI Number: 65-0036720

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CAMARA , ROSA M
121 ALHAMBRA PLAZA
10TH FLOOR
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: ROSA DE LA CAMARA

04/17/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name RON, ALICIA
Address 3530 MYSTIC POINTE DR. #610
City-State-Zip: AVENTURA FL 33180

Title TREASURER
Name MADSEN, KAREN
Address 3530 MYSTIC POINTE DR. #409
City-State-Zip: AVENTURA FL 33180

Title D
Name GLICKMAN, MORRIS
Address 3580 MYSTIC POINTE DRIVE # 702
City-State-Zip: MIAMI FL 33180

Title SECRETARY
Name ZAMPELLA, PATTY
Address 3530 MYSTIC POINTE DR #2515
City-State-Zip: AVENTURA FL 33180

Title PRESIDENT
Name MIMOUN, ORIT
Address 3530 MYSTIC POINTE DR #2615
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name SAVINO, VICTOR
Address 3530 MYSTIC POINTE DRIVE #2712
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name LLARREGUI, CARLOS
Address 3530 MYSTIC POINTE DRIVE # PH15
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: ORIT MIMOUN

PRESIDENT

04/17/2015

Electronic Signature of Signing Officer/Director Detail

Date