

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47406

Entity Name: 1446 LENOX CONDO ASSOCIATION, INC.**Current Principal Place of Business:**1446 LENOX AVE.
MIAMI BEACH, FL 33139**Current Mailing Address:**PO BOX 191042
MIAMI BEACH, FL 33119 US**FEI Number:** 65-0383273**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AMERICAN PROPERTY MANAGEMENT OF MIAMI BEACH, INC.
1370 WASHINGTON AVE
SUITE 214
MIAMI BEACH, FL 33139 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:** AMERICAN PROPERTY MANAGEMENT

05/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, SECRETARY
Name BAKKUM, LORI
Address 1446 LENOX AVE #5
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER
Name JOHANSON, STEVE
Address 1446 LENOX AVE #2
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name KRAZIG, ELIZABETH
Address 1446 LENOX AVE. #6
City-State-Zip: MIAMI BEACH FL 33139

Title VP, DIRECTOR
Name POUNSBERRY, MICHAEL
Address 1446 LENOX AVE. #1
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT
Name PONTERI, ERIC
Address 1446 LENNOX
City-State-Zip: MIAMI BEACH FL 33139

Title LCAM
Name VELAZQUEZ, ANDREA
Address PO BOX 191042
City-State-Zip: MIAMI BEACH FL 33119

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: ANDREA VELAZQUEZ

LCAM

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date