2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002137

Entity Name: REGENCY MEDICAL CENTER CONDOMINIUM ASSOCIATION,

INC.

Current Principal Place of Business:

9195 SW 72ND ST MIAMI, FL 33173

Current Mailing Address:

P.O. BOX 330044

COCONUT GROVE, FL 33233

FEI Number: 65-0199843

Certificate of Status Desired: No

FILED Mar 13, 2024

Secretary of State

7429336822CC

Name and Address of Current Registered Agent:

SACHER, CHARLES P 2655 LEJEUNE RD **SUITE 1101** 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DVP Title ST

Name MUINA, BARBARA Name LOMAN, JEFFREY

9195 SW 72ND ST. #210 Address 9195 S.W. 72ND ST. #210 Address

City-State-Zip: MIAMI FL 33173 City-State-Zip: MIAMI FL 33173

Title D Title D

Name LLANEZA. PEDRO Name VELOSO, ALEXANDER

Address 9195 SW 72ND ST #120 Address 9195 S.W. 72ND ST. #100

City-State-Zip: MIAMI FL 33173 City-State-Zip: MIAMI FL 33173

Title D

Name PLASENCIA, GUSTAVO Address 9195 SW 72ND ST 230

City-State-Zip: MIAMI FL 33173

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.

DVP

Electronic Signature of Signing Officer/Director Detail