2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2024
Secretary of State
7305555380CC

DOCUMENT# N95000003012

Entity Name: SUMMIT TOWER I OF DADELAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

EXCLUSIVE PROPERTY MANAGEMENT GROUP
175 FONTAINEBLEAU BLVD SUITE 2G1
MIAMI, FL 33172

Current Mailing Address:

SUMMIT TOWER I OF DADELAND C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP
175 FONTAINEBLEAU BLVD SUITE 2G1
MIAMI, FL 33172 US

FEI Number: 65-0752392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTELLANOS, REINALDO
9960 BIRD ROAD
MIAMI, FL 33165 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	DIRECTOR	Title	S
Name	FERNANDEZ, VICTORIA	Name	CHIRINOS, ANU
Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1	Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33172
Title	VICE - PRESIDENT	Title	PRESIDENT
Name	FERNANDEZ, TERESA	Name	IZNAGA, ZULEMA
Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1	Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33172
Title	DIRECTOR	Title	DIRECTOR
Name	LANDERA, PETER	Name	VEGA, STEVEN
Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1	Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33172
Title	TREASURER	Title	DIRECTOR
Name	MARCI, PORTELA	Name	MARIA ISABEL, AGER
Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1	Address	C/O EXCLUSIVE PROPERTY MANAGEMENT GROUP 175 FONTAINEBLEAU BLVD SUITE 2G1
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33172

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 an attachment with all other like empowered.

SIGNATURE: MARIA ISABEL , AGER DIRECTOR 01/10/2024

Electronic Signature of Signing Officer/Director Detail Date