

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003012

Entity Name: SUMMIT TOWER I OF DADELAND CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 19, 2013
Secretary of State
CC7647563827**Current Principal Place of Business:**C/O AQUA MANAGEMENT,LLC
4606 SW 74 AVE.
MIAMI, FL 33155**Current Mailing Address:**C/O AQUA MANAGEMENT,LLC
4606 SW 74 AVE.
MIAMI, FL 33155**FEI Number: 65-0752392****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**AQUA MANAGEMENT, LLC
4606 SW 74 AVE.
MIAMI, FL 33155 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 PD
Name FERNANDEZ, VICTORIA
Address 9125 S.W. 77 AVE # 101
City-State-Zip: MIAMI FL 33156Title VPD
Name GUTIERREZ, CARLOS
Address 9125 S.W. 77 AVE # 204
City-State-Zip: MIAMI FL 33156Title SD
Name IZNAGA, ZULEMA
Address 9125 S.W. 77 AVE # 308
City-State-Zip: MIAMI FL 33156Title TREASURER
Name GOVANTES, MIRIAM
Address 9125 SW 77 AVE #105
City-State-Zip: MIAMI FL 33156Title DIRECTOR
Name GARCIA, HILDA
Address 9125 SW 77 AVE #704
City-State-Zip: MIAMI FL 33156Title DIRECTOR
Name BERNAL, FELIPE
Address 9125 SW 77 AVE #809
City-State-Zip: MIAMI FL 33156Title DIRECTOR
Name CASTELLON, ANDRES
Address 9125 SW 77 AVE #305
City-State-Zip: MIAMI FL 33156Title DIRECTOR
Name SIERRA, ELSA
Address 9125 SW 77 AVE #603
City-State-Zip: MIAMI FL 33156

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: VICTORIA FERNANDEZ**PRESIDENT****03/19/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date