

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003286

Entity Name: SEACOAST 5151 CONDOMINIUM ASSOCIATION, INC.

FILED
Feb 02, 2022
Secretary of State
6306895984CC

Current Principal Place of Business:

5151 COLLINS AVENUE
226
MIAMI BEACH, FL 33140

Current Mailing Address:

5151 COLLINS AVENUE
226
MIAMI BEACH, FL 33140 US

FEI Number: 65-0630810

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLAXBERG, GRAYSON, KUKOFF AND FORTEZA, P.A
25 SE 2ND AVENYUE SUITE 730
MIAMI, FL 33131 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 P
Name FALBO, STEFANO
Address 5151 COLLINS AVE., APT. #226
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name VINELLI, FERNANDO
Address 5151 COLLINS AVENUE - APT. 226
City-State-Zip: MIAMI BEACH FL 33140

Title T
Name FIGUERAS, OLGA
Address 5151 COLLINS AVE. APT. #226
City-State-Zip: MIAMI BEACH FL 33140

Title SECRETARY
Name LAMBRECHTS, MARIA CAROLINA
Address 5151 COLLINS AVENUE
226
City-State-Zip: MIAMI BEACH FL 33140

Title VP
Name DE MARTINO, RALPH
Address 5151 COLLINS AVE., APT. #226
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name SCHULLMAN, GARY J
Address 5151 COLLINS AVENUE
226
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name CANO, ERNESTO
Address 5151 COLLINS AVENUE
226
City-State-Zip: MIAMI BEACH FL 33140

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: OLGA M. FIGUERAS

TREASURER

02/02/2022

Electronic Signature of Signing Officer/Director Detail

Date