

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 302982

FILED
May 11, 2009
Secretary of State

Entity Name: BAL HARBOUR MANOR INC

Current Principal Place of Business:

10190 COLLINS AVE.
BAL HARBOUR, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

10190 COLLINS AVE.
BAL HARBOUR, FL 33154 US

New Mailing Address:

FEI Number: 59-1287048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, NICHOLAS M.
1111 LINCOLN RD MALL
SUITE 500
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DALTON, DIANA
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: VD () Delete
Name: CARMEL, RICHARD
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: D () Delete
Name: FABER, BARBARA
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: TD () Delete
Name: BEGIER, NANCY
Address: 10190 COLLINS AVE
City-St-Zip: BAL HARBOUR, FL

Title: SD () Delete
Name: CULLEN, PATRICIA
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: DALTON, DIANA
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BARETTO, JEAN
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: REVERTE, PATRICIA
Address: 10190 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33154

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA REVERTE

PD

05/11/2009

Electronic Signature of Signing Officer or Director

_____ Date