2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2006 8:00 am **Secretary of State DOCUMENT # 709954** 1. Entity Name 03-01-2006 90028 012 ****61.25 WILEY CONDOMINIUM APTS., INC. Principal Place of Business Mailing Address 1719 WILEY STREET 1719 WILEY STREET UNIT 15 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-1202375 Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MONTICELLI, GLADYS Street Address (P.O. Box Number is Not Acceptable) 1719 WILEY STREET UNIT 15 HOLLYWOOD FL 33020 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE ☐ Change Addition GLASHOW, BASIL L NAME NAME 1715 WILEY ST. APT 12 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020 CITY-ST-7IP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition MONTICELLI, GLADYS NAME NAME 1715 WILEY ST., APT. 15 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020 CITÝ-ST-ZIP · CITY-ST-7IP Delete . TITLE ☐ Addition MARGELU, DANIEL NAME NAME STREET ADDRESS 1715 WILEY ST., APT. 19 STREET ADDRESS HOLLYWOOD FL 33020 CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change TITLE TITLE ☐ Addition MONTELLO, ALBERT NAME NAME STREET ADDRESS 1715 WILEY ST. #8 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33020 CITY-ST-ZIP VP ☐ Delete TITLE ☐ Change ☐ Addition REESE, CRAIG E NAME NAME P O BOX 220143 N/A STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020 CITY - ST - ZIP CITY-ST-ZIP Delete TITLE ☐ Change TITLE ☐ Addition MORROW, CYRIL NAME 1715 WILEY ST, APT #17 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 Statutos; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all the empowered.

CITY-ST-ZIP

SIGNATURE:

City-ST-7IP

Fib 15, 2006 (954) 92/3994

FILED