## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#715464**

FILED Feb 07, 2004 Secretary of State

Entity Name: 801 MERIDIAN AVENUE CONDOMINIUM APARTMENTS, INC.

**New Principal Place of Business: Current Principal Place of Business:** 801 MERIDIAN AVENUE MIAMI BEACH, FL 33139 **Current Mailing Address: New Mailing Address:** 801 MERIDIAN AVENUE 801 MERIDIAN AVENUE CONDO ASSOCIATION MAILBOX MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 FEI Number: 59-1274805 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRESCONE, TINA 801 MERIDIÁN AVENUE MIAMI BEACH, FL 33139 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WILSON, VIVANCO Name: Name: Address: 801 MERIDIAN AVENUE 4D Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SPIEGLER, HARVEY Name: Address: 801 MERIDIAN AVE #1B Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition TRESCONE, TINA TRESCONE, TINA Name: Name: 801 MERIDIAN AVENUE 5G 801 MERIDIAN AVENUE 5G Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 Title: () Delete Title: ( ) Change (X) Addition Name: Name: LANDRETH, RAY 801 MERIDIAN AVENUE 2C Address: Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 3313

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TINA TRESCONE T 02/07/2004