

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2008 8:00 am
Secretary of State

02-26-2008 90010 014 ****70.00

DOCUMENT # 716025 1. Entity Name ROLLING GREEN CONDOMINIUM F, INC.					
Principal Place of Business 1301 N E 191ST STREET MIAMI, FL 33179			Mailing Address 1301 N E 191ST STREET MIAMI, FL 33179		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1288994	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BATLAGLIA, JAMES 1301 N.E. 191 ST #304 NORTH MIAMI BEACH, FL 33179			7. Name and Address of New Registered Agent Name <u>SHEDELL & ASSOCIATES, P.A.</u> Street Address (P.O. Box Number is Not Acceptable) <u>3650 NORTH FEDERAL HIGHWAY SUITE 202</u> <u>LIGHTHOUSE POINT, FL 33064</u> City <u>FL</u> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BATTAGLIA, JAMES 1301 NW 191 ST #304 N. MIAMI BEACH, FL 33179	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KATZ, PAUL 1301 N.E. 191ST #406 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-S PAUL, DIANE 1301 NE 191 ST. #110 N. MIAMI BEACH, FL 33179	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIEGEL, DANNIS 1301 N.E. 191ST #213 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROWN, FRANCES 1301 NE 191 ST. N. MIAMI BEACH, FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT VEREAU, MAGGIE 1301 NE 191ST #108 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP KATZ, PAUL M 1301 NE 191 ST. #406 N. MIAMI BEACH, FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, MARY 1301 NE 191ST #413 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VEREAU, MAGGIE 1301 NE 191 ST. #108 N. MIAMI BEACH, FL 33178	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M FOLAND, JANICE 1301 NE 191ST #218 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FURMAN, GILBERTA 1301 NE 191 ST. #419 N. MIAMI BEACH, FL 33179	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M FOLAND, JANICE 1301 NE 191ST #218 N. MIAMI BEACH FL 33179	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			1/08 305-949-1928		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		