

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718293

FILED
May 11, 2009
Secretary of State

Entity Name: BAYVIEW CONDOMINIUM, INC.

Current Principal Place of Business:

1345 LINCOLN ROAD, #306
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1345 LINCOLN ROAD, #306
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 59-1491351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TRIAY, CARLOS A P.A.
3750 NW 87TH AVE
SUITE 100
MIAMI, FL 33178 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ACEVEDO, DAVID
Address: 1345 LINCOLN RD #704
City-St-Zip: MIAMI BEACH, FL 33139

Title: Y () Delete
Name: CONSUEGRA, RAFAEL
Address: 1345 LINCOLN RD #901
City-St-Zip: MIAMI BEACH, FL 33139

Title: T () Delete
Name: MORALES, ESTHER
Address: 1345 LINCOLN RD #402
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: JEREZA, CLIFFORD
Address: 1345 LINCOLN RD #602
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: WLODARCZYK, RITA T
Address: 1345 LINCOLN RD #805
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ACEVEDO

P

05/11/2009

Electronic Signature of Signing Officer or Director

_____ Date