## 2008 NOT-FOR-PROFIT CORPORATION

## Mar 20, 2008 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT #720563** 03-20-2008 90023 020 \*\*\*\*61.25 MAISON GRANDE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 6039 COLLINS AVE. 6039 COLLINS AVE. 50000007 MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052008 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 59-1377619 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FRIEDMAN, DAVID 100 SE THIRD AVE. Street Address (P.O. Box Number is Not Acceptable) 11TH FLOOR FORT LAUDERDALE, FL 33394 City 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Change 🗡 Addition Delete resident JARAMILLO, MARILYN Urbana NAME Benito, Urba NAME 6039 COLLINS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33140 CITY-ST-ZIP M 12-1 TITLE Delete TITLE ☐ Change Addition MIRABAL, PEDRO NAME NAME 6039 COLLINS AVE. STREET ADDRESS STREET ADDRESS Collins AJC CITY-ST-ZIP MIAMI BEACH, FL 33140 CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition ireus wer NAME GOMEZ, MARIA Martin NAME Mich Buch, Fr 6039 COLLINS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-77P MIAMI BEACH, FL 33140 CITY-ST-ZIP Delete TITLE rector TITLE ☐ Change Villa verde, Consuelo GUERRA, BLANCA NAME NAME STREET ADDRESS 6039 COLLINS AVE. 6039 Collass STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33140 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NADRICH, MARILYN NAME STREET ADDRESS 6039 COLLINS AVE. STREET ADORESS CITY-ST-ZIP MIAMI BEACH, FL 33140 CITY-ST-ZIP

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,

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

ECHEGOYEN, AURORA L

MIAMI BEACH, FL 33140

6039 COLLINS AVE.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

ves. SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Change

■ Addition

**FILED**