

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726892

FILED
Jan 11, 2008
Secretary of State

Entity Name: ISLA MERITA CONDOMINIUM, INC.

Current Principal Place of Business:

3640 CITRUS TRACE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

3640 CITRUS TRACE
DAVIE, FL 33328

New Mailing Address:

FEI Number: 59-1749306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN & JORR
1501 N.W. 49TH STREEY
SECOND FLOOR
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

KATZMAN & KORR
1501 N.W. 49TH STREET
SECOND FLOOR
FT. LAUDERDALE, FL 33309 US

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: DONNA BERGER

01/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: O'CONNOR, BRIAN
Address: 3626 CITRUS TRACE
City-St-Zip: DAVIE, FL 33328

Title: VD () Delete
Name: DASHIFF, CARY
Address: 3660 CITRUS TRACE #3
City-St-Zip: DAVIE, FL 33328

Title: T () Delete
Name: BAILEY, LAURA
Address: 3624 CITRUS TRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: CHIN, VIVIENNE
Address: 3627 CITRUS TRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: ARMAND, CORINNE
Address: 3615 CITRUS TRACE #1
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: HERMAN, JUDY
Address: 3637 CITRUS TRACE
City-St-Zip: DAVIE, FL 33328

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: D (X) Change () Addition
Name: SHERMAN, SADOWSKY
Address: 3601 CITRUS TRACE
City-St-Zip: DAVIE, FL 33328

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: LAURA BAILEY

T

01/11/2008

Electronic Signature of Signing Officer or Director

Date