

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728081

FILED
Jan 12, 2009
Secretary of State

Entity Name: BRICKELL BAY TOWER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BRICKELL BAY TOWER
1408 BRICKELL BAY DRIVE
MAIMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

BRICKELL BAY TOWER
1408 BRICKELL BAY DRIVE
MAIMI, FL 33131 US

New Mailing Address:

FEI Number: 59-1521504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENZUELA, DOUGLAS P
1408 BRICKELL BAY DRIVE
MIAMI, FL 33131 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: PD () Delete
Name: BORGES, FREDDY MR.
Address: 1408 BRICKELL BAY DRIVE #1103
City-St-Zip: MIAMI, FL 33131

Title: VD () Delete
Name: WILKE, RICHARD MR.
Address: 1408 BRICKELL BAY DRIVE, #809
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: SALAZAR, ALFONSO MR.
Address: 1408 BRICKELL BAY DR. #313
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: LOYOLA, EMELINA MRS.
Address: 1408 BRICKELL BAY DR. #406
City-St-Zip: MIAMI, FL 33131

Title: ASD () Delete
Name: VIANELLO, MARGARITA MRS.
Address: 1408 BRICKELL BAY DRIVE, #1115
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: CUBAS, MERCEDES
Address: 1408 BRICKELL BAY DR. #1011
City-St-Zip: MIAMI, FL 33131

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
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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: FREDDY BORGES

PD

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date