

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 27, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90179 047 \*\*\*\*61.25

**DOCUMENT # 728081**

1. Entity Name  
**BRICKELL BAY TOWER CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**BRICKELL BAY TOWER  
1408 BRICKELL BAY DRIVE  
MIAMI FL 33131  
US**

Mailing Address

**BRICKELL BAY TOWER  
1408 BRICKELL BAY DRIVE  
MIAMI FL 33131  
US**

**10028354**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1521504**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VALENZUELA, DOUGLAS P  
1408 BRICKELL BAY DRIVE  
MIAMI FL 33131**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

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  Delete  
NAME **PD ZAMORA, NELLY R.**  
STREET ADDRESS **1408 S. BAYSHORE DRIVE, #1211**  
CITY-ST-ZIP **MIAMI FL**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **VD KANNER, RICHARD**  
STREET ADDRESS **1408 BRICKELL BAY DRIVE, #1008**  
CITY-ST-ZIP **MIAMI FL 33131**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **D HEWETT, ERNEST J**  
STREET ADDRESS **1408 BRICKELL BAY DRIVE**  
CITY-ST-ZIP **MIAMI FL 33131**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **T DBRAFMAN, HOWARD**  
STREET ADDRESS **1408 BRICKELL BAY DR STE 411**  
CITY-ST-ZIP **MIAMI FL**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **D SLACK, THEODORE**  
STREET ADDRESS **14808 BRICKELL BAY DRIVE**  
CITY-ST-ZIP **MIAMI FL 33131**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **D CASTELLANOS, MARIA**  
STREET ADDRESS **2110 S W 24TH TERRACE**  
CITY-ST-ZIP **MIAMI FL 33145**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Nelly Zamora*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-24-2003**

Date

Daytime Phone #

CR2E037 (10/02)