

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90055 003 ****61.25

DOCUMENT # 731661 1. Entity Name THE SPRINGS CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 4655 ROYAL POINCIANA BLVD. MIAMI SPRINGS, FL 33265 US		Mailing Address C/O RI-ART SERVICES, INC. P.O. BOX 651285 MIAMI, FL 33265	
2. Principal Place of Business 465 Royal Ponciana Bl Suite, Apt. #, etc.		3. Mailing Address MCM Rlty Property Mgmt 190 Westward Dr Ste A City & State Miami Springs, Fl.	
City & State Miami Springs, Fl.		City & State Miami Springs, Fl.	
Zip 33166		Zip 33166	
Country US		Country US	
6. Name and Address of Current Registered Agent DOMIKIAM, SSERGIO 911 PLOVER AVE MIAMI SPRINGS, FL 33166		7. Name and Address of New Registered Agent Name Miriam C. Marrero Street Address (P.O. Box Number is Not Acceptable) MCM Realty Property Mgmt. 190 Westward Dr. Ste. A City Miami Springs	
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 <i>Miriam C. Marrero</i> Miriam C. Marrero 1/21/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2005		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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEDEL, VINCENT 330 TORRING SYDE DRIVE MIAMI SPRINGS, FL 33166	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, JEANETTE 465 S. ROYAL POINCIANA BLVD #12-B MIAMI SPRINGS, FL 33166	☒ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEENEY, TERRY 4651 S ROYAL DRIVE #7-B MIAMI SPRINGS, FL 33166	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LICATA, J. VICTOR 4655 S. ROYAL POINCIANA BLVD., #8-B MIAMI SPRINGS, FL 33166	☒ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TRAVIESO, MIRIAM 1410 ALBERTA ST CROAL GABLES, FL 33134	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SERGIO, DONIKIAH 911 PLOVER AVE MIAMI SPRINGS, FL 33166	☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Medel, Vincent 330 Morningside Dr. Miami Springs, Fl. 33166	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Howard, Virginia 6240 NW 38 Terrace Virginia Gardens, Fl. 33166	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sweeney, Terry 465 Royal Poinciana Bl #7B Miami Springs, Fl. 33166	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Alfonso, Angela 465 Royal Poinciana Bl #12A Miami Springs, Fl. 33166	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Travieso, Miriam 1410 Alberta St. Coral Gables, Fl. 33166	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Donikian, Sergio 911 Plover Ave. Miami Springs, Fl. 33166	☒ Change ☐ Addition	
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: <i>Sergio Donikian</i> Sergio Donikian SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		1/21/05 (305) 887-9000 Date Daytime Phone #	

50009462



01212005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1610421
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

Name
Miriam C. Marrero
Street Address (P.O. Box Number is Not Acceptable)
MCM Realty Property Mgmt.
190 Westward Dr. Ste. A
City
Miami Springs **FL** Zip Code
33166

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

(NOTE: Registered Agent signature required when reinstating)

DATE