2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737518

Apr 27, 2009 Secretary of State

Entity Name: MARBELLA TOWER OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

200 178TH DR **OFFICE**

SUNNY ISLES BEACH, FL 33160 US

New Mailing Address: Current Mailing Address:

200 178TH DR **OFFICE**

SUNNY ISLES BEACH, FL 33160 US

FEI Number: 59-2239890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARBELLA TOWER TOWER OWNERS ASSOCING 200 178TH DR OFFICE SUNNY ISLES BEACH, FL 33160 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:

OFFICERS AND DIRECTORS:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BRAND, RICHARD DAVELOS, MARCELLO Name: Name: 200 178TH DRIVE #302 Address: 200 -178TH DRIVE Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip: NORTH MIAMI BEACH, FL 33160

(X) Change () Addition Title: () Delete Title: TESHOBOEVA, LOLA Name: Name: ORTONE, FRANK

Address: 200 178TH DRIVE, #502 Address: 200 -178TH DRIVE. City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Delete Title: SD (X) Change () Addition RODRIGUEZ, JAIRO

NORIEGA, FIDAN Name: Name: 200-178TH DRIVE #401 200-178TH DRIVE Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: SUNNY ISLES, FL 33160

(X) Change () Addition Title: () Delete Title: PTD

Name: DITRAPANI, MARY Name: DITRAPANI, MARY Address: 200 178TH DR 602 Address: 200 -178TH DR #602

City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: MARY DITRIPANI PTD 04/27/2009