

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 31, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90259 016 \*\*\*\*61.25

**DOCUMENT # 739596**

1. Entity Name  
**TEN THOUSAND PLAZA CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**10000 W BAY HARBOR DR  
BAY HARBOR ISLANDS, FL 33154**

Mailing Address  
**C/O QUALITY ASSOCIATION MANAGERS  
PO BOX 160763  
MIAMI, FL 33116**

**66020031**



2. Principal Place of Business

3. Mailing Address

**9655 Condo Dept**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**9655 S. Dixie Hwy, 3rd Fl**

City & State

City & State

**MIAMI, Florida**

Zip

Country

Zip

Country

**33156**

**USA**

03282005

Chg-NP

CR2E037 (10/03)

4. FEI Number

**59-1865097**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**YAFFE, ROBERT H ESQ.  
11900 BISCAYNE BLVD., STE 266  
MIAMI, FL 33181**

7. Name and Address of New Registered Agent

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 reappointing)

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  
LYNCH, PETER  
10000 W BAY HARBOR DR  
BAY HARBOR ISLAND, FL 33154**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**VD  
HAAS, STEVEN  
10000 W BAY HARBOR DR  
BAY HARBOR ISLAND, FL 33154**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**SD  
MARCIAL, FERNANDO  
10000 W BAY HARBOR DR.  
BAY HARBOR ISLAND, FL 33154**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**TD  
RADO, BARBARA  
10000 W BAY HAR. DR  
BAY HARBOR ISLAND, FL 33154**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**D  
GIDEON, MAYANI  
10000 W. BAY HARBOR DR  
MIAMI, FL 33154**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
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CITY- ST- ZIP

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

SIGNATURE:

**Peter Lynch**

**4/21/05**

**305-865-4411**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone

**President**