

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90035 007 ****61.25



DOCUMENT # 741171
 1. Entity Name
FLANCO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
3701 NORTH COUNTRY CLUB DRIVE **3701 NORTH COUNTRY CLUB DRIVE**
AVENTURA FL 33180 **AVENTURA FL 33180**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
59-2072493 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FLANCO CONDOMINIUM ASSOC, INC.
3701 N COUNTRY CLUB DR
MIAMI FL 33180

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 reconstituting) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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	D	<input type="checkbox"/> Delete
NAME	SID, SHERMAN	
STREET ADDRESS	3701 N COUNTRY CLUB DR #2107	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input type="checkbox"/> Delete
NAME	PAIGE, KAREN	
STREET ADDRESS	3701 N COUNTRY CLUB DR #1409	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROFFMAN, ALLEN D	
STREET ADDRESS	3731 N COUNTRY CLUB DR #2128	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SILVERSTEIN, DAVID	
STREET ADDRESS	3731 N COUNTRY CLUB DR	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input type="checkbox"/> Delete
NAME	BEILEY, JILL	
STREET ADDRESS	3731 N. COUNTRY CLUB DR., 1826	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MAIT, LORAIN	
STREET ADDRESS	3701 N COUNTRY CLUB DR #527	
CITY-ST-ZIP	AVENTURA FL 33180	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EVELYN CRUZ SE	
STREET ADDRESS	3RD AVE # 103 A	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDREW SOLOMON	
STREET ADDRESS	3731 N. COUNTRY CLUB DR #1925	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	N/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAURA WEINER	
STREET ADDRESS	3701 N. COUNTRY CLUB DR # 2207	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____ 1/30/08 305-931-225