2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746440

FILED Apr 01, 2009 Secretary of State

Entity Name: THE GEORGIAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1621 COLL MIAMI BEA	INS AVE CH, FL 3313	Э			
Current Mailing Address:			New Maili	New Mailing Address:	
1621 COLL MIAMI BEA	LINS AVE ACH, FL 3313	9			
FEI Number:	59-2059160	FEI Number Applied For()	FEI Number Not Appl	Olicable () Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and	d Address of New Registered Agent:	
BECKER 8 121 ALHAN CORAL GA	ABLES, FL 33 named entity:	P.A. 10TH FLOOR 134 US	urpose of changing i	its registered office or registered agent, or both,	
SIGNATUF					
SIGNATOR		nic Signature of Registered Age	ent	 Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	V () NAZAR, PATRI 1621 COLLINS MIAMI BEACH,	AVE. #307	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () POLA, JORGE 1621 COLLINS MIAMI BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () DIAZ, LUISA 1621 COLLINS MIAMI BEACH,		Title: Name: Address: City-St-Zip:	S (X) Change () Addition ORTEGA, MERCEDES 410 GIRALDA AVENUE CORAL GABLES, FL 33134	
Title: Name: Address: City-St-Zip:	T () COSTALES, GI 1623 COLLINS MIAMI BEACH,	AVE # 714	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GONZALEZ, ET 1621 COLLINS MIAMI BEACH,	AVE #515	Title: Name: Address: City-St-Zip:	D (X) Change () Addition RODRIGUEZ, JUAN 1621 COLLINS AVE #906 MIAMI BEACH, FL 33139	
Title: Name: Address: City-St-Zip:	D () CANDELA, AND 1621 COLLINS MIAMI BEACH,	AVE #901	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BARREIRO, GERARDO 1621 COLLINS AVE #902 MIAMI BEACH, FL 33139	

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: JORGE POLA P 04/01/2009