2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Secretary of State **DOCUMENT #758108** 01-15-2008 90033 045 ****70.00 WATERVIEW CONDOMINIUM ASSOCIATION, INC. OF **AVENTURA** Principal Place of Business Mailing Address 40004030 20505 E. COUNTRY CLUB DR. 20505 E. COUNTRY CLUB DR. MIAMI, FL 33180 MIAMI, FL 33180 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01022008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2557138 City & State City & State Applied For Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HYMAN, SPECTOR & MARS, LLP Street Address (P.O. Box Number is Not Acceptable) **MUSEUM TOWER STE 2701** 150 WEST FLAGLER ST MIAMI, FL 33130 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 age SIGNATURE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2008 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Addition ☐ Delete TREASURE TITLE NAME SERENE MALLYN HIY37 SPRENE, MARILYN NAME 20505 E CC DR #1437 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVENTURA, FL 33180 AUCHFULA REA Addition ☐ Delete TITLE PRESIDENT TITLE EDECMAN, PAUL NAME NAME STREET ADDRESS STREET ADDRESS 25015 ECC DR #1048 AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-7IP Vice President ☐ Delete Change ☐ Addition TITLE TITLE MOLAN, ROBIN NAME NAME 20505 E. CC DR #938 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 CITY-ST-ZIP SPCKETALY TITLE Delete TITLE ☐ Change ☐ Addition LOIS ALTMAN LLY9 SIGRIO-SOFFIE, CHARNSAY NAME NAME STREET ADDRESS 20515 E CC DR #343 STREET ADDRESS AURATULA KA 33150 AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-ZIP Sec he muy ☐ Addition TITLE Delete TITLE TONE Shelly # 104 F ROWE, SHELLY S NAME NAME 20515 E CC DR #1048 STREET ADDRESS STREET ADDRESS FLA 33(80 CITY-ST-ZIP CITY-ST-ZIP AVENTURA, FL 33180 TITLE ☐ Defete TITLE ☐ Change ☐ Addition ARAZIE, LEON NAME NAME 20515 E CC DR #1046 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33180 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 aggrature 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 true ee expowered 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. residuet

FILED Jan 15, 2008 8:00 am

ATTACHMENT



Directors

Rita Blanck 20515 E. Country Club Dr. # 844 Aventura, FL 33180

Robbie Cohen 20505 E. Country Club Dr. # 1831 Aventura, FL 33180

Cherylle Ricossa 20505 E. Country Club Dr. # 1542 Aventura, FL 33180