PS 1

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 760105

1. Entity Name
ORDUNA COURT CONDOMINIUM, INC.

FILED
04 JAN 12 PM 5:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
800 SO. DIXIE HIGHWAY CORAL GABLES, FL 33146 US	299 ALHAMBRA CIRCLE STE 404 CORAL GABLES, FL 33134 US

01132004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2215948 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RAMOS, ANTONIO F
299 ALHAMBRA CIRCLE
STE 404
CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

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 reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MONTANA, JUAN C
STREET ADDRESS	540 BRICKELL KEY DR #726
CITY-ST-ZIP	MIAMI, FL 331312639
TITLE	P
NAME	PAUL, HARVEY
STREET ADDRESS	2060 LAKESHIRE DR
CITY-ST-ZIP	WEST BLOOMFIELD, MI 48323
TITLE	D
NAME	CHATT, MADELINE
STREET ADDRESS	800 S. DIXIE HWY #107
CITY-ST-ZIP	CORAL GABLES, FL 331462663
TITLE	D
NAME	WAYNE, BARNES A
STREET ADDRESS	5911 MAYNADA STREET
CITY-ST-ZIP	CORAL GABLES, FL 331463343
TITLE	V
NAME	ANA CHRISTINE, PERALTA
STREET ADDRESS	800 S DIXIE HWY #304
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	D
NAME	YOVANNA, MARTINEZ
STREET ADDRESS	800 S. DIXIE HWY #306
CITY-ST-ZIP	CORAL GABLES, FL 331462667

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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)(i), 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: see attached
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Document Number
760105
Business Entity Name
ORDUNA COURT CONDOMINIUM, INC.

FEI Number: 592215948
FEI Number Status: ○ Applied For ○ Not Applicable ◉ Current
Certificate of Status Desired ○ Yes ◉ No $8.75 each

Principal Place of Business

Address	800 SO. DIXIE HIGHWAY
Suite, Apt. #, etc.	
City, State	CORAL GABLES, FL
Zip Code & Country	33146 US

Mailing Address

Address	299 ALHAMBRA CIRCLE
Suite, Apt. #, etc.	STE 404
City, State	CORAL GABLES, FL
Zip Code & Country	33134 5114 US

Name And Address of Registered Agent

Name (Last, First, Middle, Title)	RAMOS ANTONIO F
-or- RA Business Name	
Address	299 ALHAMBRA CIRCLE
Suite, Apt. #, etc.	STE 404
City, State	CORAL GABLES, FL
Zip Code & Country	33134 5114 US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

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Business Entity Name
ORDUNA COURT CONDOMINIUM, INC.

Election Campaign Financing Trust Fund Contribution ○ Yes ◉ No

Officer/Director Name And Address

Title	PD			
Name (Last, First, Middle, Title)	HARVEY	PAUL		
-or- Entity Name				
Street Address	2060 LAKESHIRE DRIVE			
City, State	WEST BLOOMFIELD,	MI		
Zip Code & Country	483233835	US		

Title	VPD			
Name (Last, First, Middle, Title)	BARNES	WAYNE	A	
-or- Entity Name				
Street Address	800 SO. DIXIE HIGHWAY # 202			
City, State	CORAL GABLES,	FL		
Zip Code & Country	331462664	US		

Title	D			
Name (Last, First, Middle, Title)	CHATT	MADELINE		
-or- Entity Name				
Street Address	800 SO. DIXIE HIGHWAY # 107			
City, State	CORAL GABLES,	FL		
Zip Code & Country	331462663	US		

Title	D			
Name (Last, First, Middle, Title)	FALAS	ALEJANDRO	M	
-or- Entity Name				

Street Address	800 SO. DIXIE HIGHWAY # 203
City, State	CORAL GABLES, FL
Zip Code & Country	331462664
Title	D
Name (Last, First, Middle, Title)	RUBIO LORRAINE
-or- Entity Name	
Street Address	1061 N.E. 196 STREET
City, State	MIAMI, FL
Zip Code & Country	331793513
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	

○ **List more than six Officers/Directors** ◉ **No additional Officers/Directors to list**

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title: VPD

Officer/Director Signature: WAYNE A. BARNES

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