2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 8:00 am
Secretary of State
05-11-2005 90127 030 ****61.25

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DOCUMENT # 764894

1. Entity Name
OLSEN HOTEL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7300 OCEAN TERRACE MIAMI BEACH, FL 33141	4865 NW 4 STREET MIAMI, FL 33126-2121

02212005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	4101 SW 47 AVE Suite, Apt. #, etc. 105
City & State	City & State DAVIE, FL.
Zip / Country	Zip / Country 33314 / Broward

4. FEI Number
59-2420768
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROBERT MANAGEMENT CO. INC.
1840 NE 153 ST.
MIAMI, FL 33162

7. Name and Address of New Registered Agent

Name: Roberts Management Co. Inc.
Street Address (P.O. Box Number is Not Acceptable): 4101 SW 47 AVE
105
City: DAVIE FL Zip Code: 33314

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, 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDST QUINTERO, ALFREDO 4865 NW 4 STREET MIAMI, FL 331262121	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CRAYTON, GARY L 301 N BEAURE GARD ST #107 ALEXANDRIA, VA 223122908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALKER, DOUG 7300 OCEAN TERRACE #310 MIAMI BEACH, FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: X Gary Crayton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #