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

FILED Jan 31, 2008 8:00 am Secretary of State

01-31-2008 90030 019 ****61.25

DOCUMENT # N0000001751 1. Entity Name VERONA AT DEERING BAY CONDOMINIUM ASSOCIATION, INC. 400ra-Principal Place of Business Mailing Address 11981 SW 144TH CT 13627 DEERING BAY DRIVE CORAL GABLES, FL 33158 STE# 201 MIAMI, FL 33186 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032008 CR2E037 (12/06) 4. FEI Number 59-3632763 City & State City & State Applied For Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HYMAN, MICHAEL ESQ Street Address (P.O. Box Number is Not Acceptable) 150 W FLAGLER ST #2701 MIAMI, FL 33130 Zip Code FL 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 Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Due by May 1, 2008 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Delete TITLE Addition TITLE BUCHSBAUM, FRED NAME NAME STREET ADDRESS 13627 DEERING BAY DR STREET ADDRESS CORAL GABLES, FL 33158 CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME LESTER, PAUL 13627 DEERING BAY DRIVE STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33158 CITY-ST-ZIP CITY-ST-7/P Change ☐ Addition Delete TITLE TITLE MILLER, ARTHUR NAME NAME STREET ADDRESS 13627 DEERING BAY DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES, FL 33158 ☐ Change ☐ Addition Delete TITLE TITLE SALZMAN, JANE NAME NAME 13627 DEERING BAY DR STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33158 CITY-ST-ZIP CITY-ST-ZIP X Addition Change Delete TITLE TITLE SCHWARTZ, ERIC NAME NAME Bay ()1 = 4 603 13627 DEERING BAY DRIVE STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33158 CITY-ST-ZIP CITY-ST-7/P Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 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 mistee 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,

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Daytime Phone *