

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001751

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** VERONA AT DEERING BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13627 DEERING BAY DRIVE  
3000  
CORAL GABLES, FL 33158

**New Principal Place of Business:**

**Current Mailing Address:**

11981 SW 144TH CT  
STE# 201  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 59-3632763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HYMAN, MICHAEL ESQ  
150 W FLAGLER ST  
#2701  
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: T/D  
Name: MAYES, JAMES D  
Address: 13627 DEERING BAY DR 1204  
City-St-Zip: CORAL GABLES, FL 33158

Title: S/D  
Name: LEACH, NEIL  
Address: 13627 DEERING BAY DRIVE 1402  
City-St-Zip: CORAL GABLES, FL 33158

Title: D  
Name: MILLER, AURTHUR  
Address: 13627 DEERING BAY DRIVE 402  
City-St-Zip: CORAL GABLES, FL 33158

Title: P/D  
Name: KUHN, ROBERT M  
Address: 13627 DEERING BAY DRIVE 1404  
City-St-Zip: CORAL GABLES, FL 33158

Title: V/D  
Name: CHASE, BONNIE  
Address: 13627 DAIRY BAY DR 1101  
City-St-Zip: MIAMI, FL 33158

I hereby 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 all other like empowered.

SIGNATURE: SUSAN PETERSEN

MGR

01/06/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date