

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003869

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: 5000 BAYVIEW AT FISHER ISLAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6 FISHER ISLAND DR.  
FISHER ISLAND, FL 33109

**New Principal Place of Business:**

**Current Mailing Address:**

6 FISHER ISLAND DR.  
FISHER ISLAND, FL 33109

**New Mailing Address:**

FEI Number: 65-0605833      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 US

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

SIEGFRIED, RIVERA, LERNER, DE LA TORRE & S  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 US

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: NICOLAS SIEGFRIED

03/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: MITCHEL, BETTY  
Address: 5044 FISHER ISLAND DR  
City-St-Zip: FISHER ISLAND, FL 33109

Title: VP ( ) Delete  
Name: PERRY, POPKIN  
Address: 5033 FISHER ISLAND DR  
City-St-Zip: FISHER ISLAND, FL 33109

Title: PD ( ) Delete  
Name: FRED, WEBER  
Address: 5043 FISHER ISLAND DR  
City-St-Zip: FISHER ISLAND, FL 33109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: MITCHELL, BEATRIZ  
Address: 5044 FISHER ISLAND DR  
City-St-Zip: FISHER ISLAND, FL 33109

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: FRED, WEBER  
Address: 5043 FISHER ISLAND DR  
City-St-Zip: FISHER ISLAND, FL 33109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: FREDRIC WEBER

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date