

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Apr 01, 2008  
Secretary of State**

DOCUMENT# N01000003959

Entity Name: ALHAMBRA PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**209 N. BIRCH ROAD  
ATTN:FRONT DESK  
FORT LAUDERDALE, FL 33304**New Principal Place of Business:****Current Mailing Address:**209 N. BIRCH ROAD  
ATTN:FRONT DESK  
FORT LAUDERDALE, FL 33304**New Mailing Address:**

FEI Number: 65-1113536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BERGER, DONNA D ESQ  
3111 STIRLING RD  
HOLLYWOOD, FL 333126525 US**Name and Address of New Registered Agent:**POLIAKOFF, GARY A ESQ  
3111 STIRLING RD  
HOLLYWOOD, FL 333126525 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: GARY A .POLIAKOFF

04/01/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: DP ( ) Delete  
Name: BARNETT, R JOSEPH  
Address: 209 N BIRCH RD, #1001  
City-St-Zip: FORT LAUDERDALE, FL 33304Title: T ( ) Delete  
Name: WORKMAN, SIDNEY  
Address: 209 N BIRCH RD 702  
City-St-Zip: FORT LAUDERDALE, FL 33304Title: D ( ) Delete  
Name: HURY, HANK  
Address: 209 N BIRCH RD, #1202  
City-St-Zip: FORT LAUDERDALE, FL 33304Title: D ( ) Delete  
Name: JAY, DAVID  
Address: 209 N BIRCH RD#902  
City-St-Zip: FORT LAUDERDALE, FL 33304Title: D ( ) Delete  
Name: JACKMAN, STEPHEN  
Address: 209 B BIRCH RD #1101  
City-St-Zip: FORT LAUDERDALE, FL 33304**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: R JOSEPH BARNETT

PRES

04/01/2008

Electronic Signature of Signing Officer or Director

Date