2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000000235

TI FILED
Dec 05, 2005
Secretary of State

Entity Name: THE MINORCA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

815 NW 57 AVENUE,STE 405 2030 S.DOUGLAS ROAD MIAMI, FL 33126 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

815 NW 57 AVENUE,STE 405 2030 S. DOUGLAS ROAD MIAMI, FL 33126 CORAL GABLES, FL 33134

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

SHEAR, DAVID

201 ALHAMBRA CIRCLE,STE 601

CORAL GABLES, FL 33134 US

FERNANDEZ, SUSANA

2030 S. DOUGLAS ROAD

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: SUSANA FERNANDEZ 12/05/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 ESPINOSA, FRANCISCO A
 Name:
 COOPER, JOHN

 Address:
 815 NW 57TH AVENUE,STE 405
 Address:
 152 GIRADINO DRIVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 ISLAMORADA, FL 33036

City-St-Zip: MIAMI, FL 33126 City-St-Zip: ISLAMORADA, FL 33036

Title: D () Delete Title: D (X) Change () Addition Name: ESPINOSA, FRANCISCO C Name: REYNOLDS, DAWN

 Address:
 815 NW 57TH AVENUE,STE 405
 Address:
 2030 S. DOUGLAS ROAD #505

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: () Delete Title: D () Change (X) Addition

Name: ZHIMET, WHITNEY

 Address:
 Address:
 2030 S. DOUGLAS ROAD #504

 City-St-Zip:
 City-St-Zip:
 CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUSANA FERNANDEZ RA 12/05/2005