

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
May 12, 2006  
Secretary of State**

DOCUMENT# N02000000235

**Entity Name:** THE MINORCA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2030 S. DOUGLAS ROAD  
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**2030 S. DOUGLAS ROAD  
CORAL GABLES, FL 33134**New Mailing Address:**

FEI Number: 20-2265595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**FERNANDEZ, SUSANA  
2030 S. DOUGLAS ROAD  
CORAL GABLES, FL 33134 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: P ( ) Delete  
Name: COOPER, JOHN C  
Address: 152 GIARDINO DRIVE  
City-St-Zip: ISLAMORADA, FL 33036

Title: VP ( ) Delete  
Name: VELASCO-ESQUIVEL, MIRIAM  
Address: 2030 S. DOUGLAS ROAD #105  
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete  
Name: ZIMET, WHITNEY  
Address: 2030 S. DOUGLAS ROAD #504  
City-St-Zip: CORAL GABLES, FL 33134

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

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

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

Title: S (X) Change ( ) Addition  
Name: PARDO, ROSEMARY  
Address: 2030 S. DOUGLAS ROAD #417  
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 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: SUSANA FERNANDEZ

RA

05/12/2006

Electronic Signature of Signing Officer or Director

Date