

2005 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT

DOCUMENT # N03000002606			
1. Entity Name VUE CONDOMINIUM ASSOCIATON, INC.			
Principal Place of Business 2121 PONCE DE LEON BLVD., PH CORAL GABLES, FL 33134		Mailing Address 2121 PONCE DE LEON BLVD., PH CORAL GABLES, FL 33134	
2. Principal Place of Business 2001 N. OCEAN BLVD. Suite, Apt. #, etc.		3. Mailing Address 2001 N. OCEAN BLVD. Suite, Apt. #, etc.	
City & State FORT LAUDERDALE, FL Zip 33305-3729 Country		City & State FORT LAUDERDALE, FL Zip 33305-3729 Country	
4. FEI Number 20-0871857		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent REGISTERED AGENTS OF FLORIDA, L.L.C. 100 S.E. SECOND ST., STE. 2900 MIAMI, FL 33131-2130		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADAMS, BRUCE 2121 PONCE DE LEON BLVD., PH CORAL GABLES, FL 33134 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/B JUDITH A. JARVIS 2001 N. OCEAN BLVD FORT LAUDERDALE, FL 33305-3729 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHANNON, KARR 2121 PONCE DE LEON BLVD., PH CORAL GABLES, FL 33134 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D MARK TRAKHTENBERG 2001 N. OCEAN BLVD. FORT LAUDERDALE, FL 33305-3729 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JARVIS, JUDITH A 2121 PONCE DE LEON BLVD., PH CORAL GABLES, FL 33134 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D FREDRIC SINGER 2001 N. OCEAN BLVD. FORT LAUDERDALE, FL 33305-3729 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/B JOSEPH A. MIELE 2001 N. OCEAN BLVD. FORT LAUDERDALE, FL 33305-3729 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EUGENE OLAR 2001 N. OCEAN BLVD. FORT LAUDERDALE, FL 33305-3729 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judith A. Jarvis* JUDITH A. JARVIS 10/28/05 954-369-3349

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR