2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# N03000003825

Entity Name: BAY VIEW LOFTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2000 BAY DRIVE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

918 OCEAN DRIVE
SUITE 207
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-2747643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EUROPEAN AMERICAN REAL ESTATE
918 OCEAN DRIVE
SUITE 207
MIAMI BEACH, FL 33139 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: GOBIN, ALLAN
Address: 2000 BAY DRIVE # 203
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP ( ) Delete
Name: SCHOONOVER, MARK
Address: 151 N.W. 16TH AVE. # 368
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: ST ( ) Delete
Name: FUHRMAN, JUSTIN
Address: 9655 E. BAY HARBOR DR. #7N
City-St-Zip: BAY HARBOR ISLES, FL 33154

Title: D ( ) Delete
Name: LORETTO, MARCO
Address: 2401 S.W. 2ND. AVENUE
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete
Name: SABATINI, JOHN
Address: 322 BAILY ROAD
City-St-Zip: ROSEMONT, PA 19010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HEMCHAND, ANDY
Address: 2000 BAY DRIVE # 404
City-St-Zip: MIAMI BEACH, FL 33141

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

Title: T (X) Change ( ) Addition
Name: LORETTO, MARCO
Address: 2401 S.W. 2ND AVE
City-St-Zip: MIAMI, FL 33129

Title: S (X) Change ( ) Addition
Name: LONGO, DOLORES
Address: 2000 BAY DRIVE # 211
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change ( ) Addition
Name: ANGULO, IVAN
Address: 2000 BAY DRIVE #201
City-St-Zip: MIAMI BEACH, FL 33141

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: ANDY HEMCHAND P 04/18/2007

Electronic Signature of Signing Officer or Director — Date