2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000003825

TI FILED
Nov 30, 2007
Secretary of State

Entity Name: BAY VIEW LOFTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal F	Place of Business:
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2000 BAY DRIVE

MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

918 OCEAN DRIVE PO BOX 667348

SUITE 207 POMPANO BEACH, FL 33066 MIAMI BEACH, FL 33139

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

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

EUROPEAN AMERICAN REAL ESTATE
918 OCEAN DRIVE
SUITE 207

PERSONAL PROPERTY MANAGEMENT INC
1500 WEST CYPRESS CREEK ROAD
SUITE 419

MIAMI BEACH, FL 33139 US FORT LAUDERDALE, FL 33309 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: ROBERT ANDREWS 11/30/2007

Electronic Signature of Registered Agent Date

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

Title: P () Delete Title: () Change () Addition

 Name:
 HEMCHAND, ANDY
 Name:

 Address:
 2000 BAY DRIVE # 404
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 SCHOONOVER, MARK
 Name:

 Address:
 151 N.W. 16TH AVE. # 368
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 City-St-Zip:

 Name:
 LORETTO, MARCO
 Name:
 LORETTO, MARCO

 Address:
 2401 S.W. 2ND AVE
 Address:
 2401 S.W. 2ND AVE

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:
 MIAMI, FL 33129

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

 Name:
 LONGO, DOLORES
 Name:

 Address:
 2000 BAY DRIVE # 211
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:

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

 Name:
 ANGULO, IVAN
 Name:

 Address:
 2000 BAY DRIVE #201
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33141
 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: MARK SCHOONOVER VP 11/30/2007