

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007141

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: OAK AVENUE PARKING PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

190 NE THIRD STREET  
ATTN: FINANCE SCOTT SIMPSON  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

190 NE THIRD STREET  
ATTN: FINANCE SCOTT SIMPSON  
MIAMI, FL 33132

**New Mailing Address:**

FEI Number: 59-1324169      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NORIEGA, ARTHUR  
190 NE THIRD STREET  
ATTN: FINANCE  
MIAMI, FL 33132 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: PD ( ) Delete  
Name: REYES, JAMI  
Address: 150 SE 2ND AVENUE, SUITE 600  
City-St-Zip: MIAMI, FL 33101

Title: VD ( ) Delete  
Name: HERTZ, ARTHUR  
Address: 3195 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL 33134

Title: VSTD ( ) Delete  
Name: HILL, MARLON  
Address: 200 SOUTH BISCAYNE BLVD, #2750  
City-St-Zip: MIAMI, FL 33131

Title: VD ( ) Delete  
Name: JELKE, THOMAS B  
Address: 2403 SOUTH MIAMI AVENUE  
City-St-Zip: MIAMI, FL 33129

Title: VD ( ) Delete  
Name: NOSTRAND, STEPHEN  
Address: 95 MERRICK WAY, SUITE 380  
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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SCOTT SIMPSON

CFO

01/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date