

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006259

FILED  
May 07, 2007  
Secretary of State

Entity Name: 401 BLU OF NORTH BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

401 69TH STREET  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

401 69TH STREET  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 20-2138920      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SHERMAN, THOMAS G  
218 ALMERIA AVENUE  
CORAL GABLES, FL 33134      US

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

SHERMAN, THOMAS G  
90 ALMERIA AVENUE  
CORAL GABLES, FL 33134      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: THOMAS G SHERMAN

05/07/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD      ( ) Delete  
Name: FLOOD, MICHAEL L  
Address: 90 W. FLANKLIN  
City-St-Zip: CRYSTAL LAKE, IL 60014

Title: VD      ( ) Delete  
Name: O'MACHEL, RAYMOND P  
Address: 300 S. LINCOLN  
City-St-Zip: PARK RIDGE, IL 60068

Title: SD      ( ) Delete  
Name: DEMPSEY, BRIAN G  
Address: 401 69TH STREET  
City-St-Zip: MIAMI BEACH, FL 33141

**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:

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: MICHAEL L. FLOOD

P

05/07/2007

Electronic Signature of Signing Officer or Director

Date