2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009596

FILED Feb 12, 2009 Secretary of State

Entity Name: SKYLINE ON BRICKELL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2101 BRICKELL AVENUE 2101 BRICKELL AVENUE 105

MIAMI, FL 33129 US

MIAMI, FL 33129

Current Mailing Address: New Mailing Address:

2101 BRICKELL AVENUE 2101 BRICKELL AVENUE MIAMI, FL 33129

MIAMI, FL 33129 US

FEI Number: 90-0268466 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:

SKLD, INC 201 ALHAMBRA CIRCLE, STE 1102 CORAL GABLES, FL 33134

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:

() Delete

(X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

NOVITSKI, CHAD FRANCO, JAIME Name: Name:

2101 BRICKELL AVE 1912 Address: 2101 BRICKELL AVE 611 Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33129

Title: Title: (X) Change () Addition () Delete FRANCO, JAMIE

Name: Name: GRIMALDI, JOSEPH Address: 2101 BRICKELL AVENUE 611 Address: 2101 BRICKELL AVENUE 1701

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33129

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

GRIMALDI, JOSEPH Name: OTERO, EDUARDO Name: 2101 BRICKELL AVENUE 1701 2101 BRICKELL AVENUE 1805 Address:

Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33129

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

FICK, JUDY Name: VAIANA, ERICK Name:

2101 BRICKELL AVENUE 1709 2101 BRICKELL AVENUE 3002 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33129

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

SEBA, JIMMY ROSEN, GARY Name: Name:

2101 BRICKELL AVE UNIT 1006 2101 BRICKELL AVE UNIT 3403 Address: Address:

MIAMI, FL 33129 US MIAMI, FL 33129 US City-St-Zip: 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: GARY ROSEN D 02/12/2009