

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 26, 2006
Secretary of State**

DOCUMENT# N05000001909

Entity Name: SONOMA SOUTHSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2601 S BAYSHORE DRIVE SUITE 200
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2601 S BAYSHORE DRIVE SUITE 200
MIAMI, FL 33133

New Mailing Address:

396 ALHAMBRA CIRCLE
SUITE #230
CORAL GABLES, FL 33134

FEI Number: 20-2471547 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

SHEAR, DAVID
FIELDSTONE LESTER SHEAR & DENBERG LLP
201 ALHAMBRA CIRCLE SUITE 601
CORAL GABLES, FL 33134 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: ROSA NARINO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GITLIN, BRIAN
Address: 2601 S BAYSHORE DRIVE SUITE 200
City-St-Zip: MIAMI, FL 33133

Title: VSD () Delete
Name: CACHINERO, MICHELLE
Address: 2601 S BAYSHORE DRIVE SUITE 200
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: DEBS, TONY
Address: 2601 S BAYSHORE DRIVE SUITE 200
City-St-Zip: MIAMI, FL 33133

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 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: ROSA NARINO

Electronic Signature of Signing Officer or Director

CFO

10/26/2006

Date