

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 21, 2009
Secretary of State**

DOCUMENT# N06000003778

Entity Name: 1780 S.W. 6 STREET CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1780 SW 6TH STREET
APT 3
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1780 SW 6TH STREET
APT 3
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-4716689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOREDO, GISELLE
1780 SW 6TH STREET
3
MIAMI, FL 33135 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: RUWISCH, NIURKA
Address: 1780 SW 6 ST APT 6
City-St-Zip: MIAMI, FL 33135 US

Title: STD () Delete
Name: LOREDO, GISELLE
Address: 1780 SW 6 ST APT 3
City-St-Zip: MIAMI, FL 33135 US

Title: VD () Delete
Name: HOEPELMAN, MAGALY
Address: 1780 SW 6 ST APT 5
City-St-Zip: MIAMI, FL 33135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUWISCH, NIURKA
Address: 1780 SW 6 ST APT 6
City-St-Zip: MIAMI, FL 33135 US

Title: ST (X) Change () Addition
Name: LOREDO, GISELLE
Address: 1780 SW 6 ST APT 3
City-St-Zip: MIAMI, FL 33135 US

Title: V (X) Change () Addition
Name: HOEPELMAN, MAGALY
Address: 1780 SW 6 ST APT 5
City-St-Zip: MIAMI, FL 33135 US

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: GISELLE LOREDO

ST

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date