

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012728

FILED
Apr 24, 2009
Secretary of State

Entity Name: THE PONCE DE LEON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6817 SW 81ST TERR
MIAMI, FL 33156

New Principal Place of Business:

1607 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

Current Mailing Address:

6817 SW 81ST TERR
MIAMI, FL 33156

New Mailing Address:

396 ALHAMBRA CIR
230
CORAL GABLES, FL 33134

FEI Number: 26-3207453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEAR, GARY O
6817 SW 81 TERRACE
MIAMI, FL 33143 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: TREISTER, CHARLES
Address: 6817 SW 81ST TERR
City-St-Zip: MIAMI, FL 33156

Title: VSD () Delete
Name: SHEAR, GARY
Address: 6817 SW 81ST TERR
City-St-Zip: MIAMI, FL 33156

Title: TD () Delete
Name: SCOTT, CHARLES
Address: 6817 SW 81ST TERR
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ASHKENAZI, ELIYAHU
Address: 1607 PONCE DE LEON BLVD #10C
City-St-Zip: CORAL GABLES, FL 33134

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: BRYAN RISING

PM

04/24/2009

Electronic Signature of Signing Officer or Director

Date