

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 26, 2011
Secretary of State

DOCUMENT# N07000011405

Entity Name: MAJORCA ISLES IV CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**10081 PINES BLVD
SUITE # E-1
PEMBROKE PINES, FL 33024 US**New Principal Place of Business:****Current Mailing Address:**10081 PINES BLVD
SUITE # E-1
PEMBROKE PINES, FL 33024 US**New Mailing Address:****FEI Number:** 26-1535612 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LAW OFFICES OF MARLON E. BRYAN, P.A.
5701 SHERIDAN STREET
HOLLYWOOD, FL 33021 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:** P
Name: ST. GERARD, JAINE
Address: 10081 PINES BLVD SUITE #E-1
City-St-Zip: PEMBROKE PINES, FL 33024 US**Title:** VP
Name: BROWN, ZACHARY
Address: 10081 PINES BLVD SUITE # E-1
City-St-Zip: PEMBROKE PINES, FL 33024 US**Title:** S
Name: JACKSON, JOEY
Address: 10081 PINES BLVD SUITE# E-1
City-St-Zip: PEMBROKE PINES, FL 33024 US**Title:** T
Name: GERARD, TRIKA
Address: 10081 PINES BLVD SUITE# E-1
City-St-Zip: PEMBROKE PINES, FL 33024 US

I hereby 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 all other like empowered.

SIGNATURE: J. ST. GERARD

PRES

04/26/2011

Electronic Signature of Signing Officer or Director

Date