

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2009
Secretary of State**

DOCUMENT# N94000000350

Entity Name: JANE APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3909 GARDEN AVENUE
#2
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

3909 GARDEN AVENUE
#2
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0725633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNDOLLAR, STEPHANIE
3909 GARDEN AVENUE
#2
MIAMI BEACH, FL 33140 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 () Delete
Name: BARNDOLLAR, STEPHANIE
Address: 3909 GARDEN AVENUE #2
City-St-Zip: MIAMI BEACH, FL 33140

Title: V () Delete
Name: MALAGUTTI, BETTY
Address: 62 YORK STREET
City-St-Zip: W. SPRINGFIELD, MA 01089

Title: T () Delete
Name: JENKINS, JERI
Address: 4500 SHERIDAN AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: S () Delete
Name: BELSOL, MARIA
Address: 3909 GARDEN AVE #4
City-St-Zip: MIAMI BEACH, FL 33140

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:

Title: () Change () Addition
Name:
Address:
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: STEPHANIE BARNDOLLAR

P

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date