

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 28, 2009
Secretary of State

DOCUMENT# N94000003123

Entity Name: SOUTH TOWER AT THE POINT CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**21055 YACHT CLUB DRIVE
MANAGER'S OFFICE
AVENTURA, FL 33180 US**New Principal Place of Business:****Current Mailing Address:**21055 YACHT CLUB DRIVE
MANAGER'S OFFICE
AVENTURA, FL 33180 US**New Mailing Address:****FEI Number:** 65-0579504**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
ALHAMBRA TOWERS
121 ALHAMBRA PLAZA, 10TH FLOOR
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:

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: FINEMAN, LESLIE
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180 US**Title:** D () Delete
Name: NOVACK, STANLEY
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180 US**Title:** S () Delete
Name: FERRARI, SEVERINO
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180**Title:** VP () Delete
Name: MARKS, LINDA
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180**Title:** T () Delete
Name: GAVILAN, SALVADOR
Address: 21055 YACHT CLUB DR., MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S (X) Change () Addition
Name: NOVACK, STANLEY
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180 US**Title:** D (X) Change () Addition
Name: HEICHMAN, TEDDY
Address: 21055 YACHT CLUB DRIVE, MANAGEMENT OFFICE
City-St-Zip: AVENTURA, FL 33180**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: SALVADOR GAVILAN

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07/28/2009

Electronic Signature of Signing Officer or Director_____
Date