FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1998

48



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # N9500002314 (1)

THE PRESIDENT CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 2001 S. BAYSHORE DRIVE STE 1428 /- 350 2601 S. BAYSHORE DRIVE STE 1886 /250 3. Date Incorporated or Qualified MIAMI FL 33133 MIAMI FL 33133 05/11/1995 4. FEI Number Applied For 65-0674107 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 27 22 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 🗌 Yes 🔲 No 23 Country Zip Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROBERT A. FREEMAN, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 2601 S. BAYSHORE DR. STE 料配 /4.5つ MIAMI FL 33133 City 85 Zip Code Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicat 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition NAME MAGGI, MICHELE 1.2 NAME 2601 S. BAYSHORE DR. STE #86/25つ STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME FREEMAN, ROBERT A ESQ. 2.2 NAME 2601 S. BAYSHORE DR. STE 知路 /マラウ STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33133 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE FRANCES, LOURDES NAME 3.2 NAME 2601 S. BAYSHORE DR. STE 神然ペタロ 3.3 STREET ADORESS STREET ADDRESS MIAMI FL 33133 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on the supplied with the information indicated on

6.1 TITLE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

NAME

STREET ADDRESS

4/2/18

(3.5) 858-3242

Change

Addition

FILED

Apr 10 1998 8:00am

Secretary of State