2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005
Secretary of State

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Entity Name: NORTH PORT MARKET PLACE ASSOCIATION, INC.

Current Principal Place of Business:

C/O BAYSHORE LAND GROUP, INC.
255 ALHAMBRA CIR. STE. 325
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

C/O BAYSHORE LAND GROUP, INC.
255 ALHAMBRA CIR. STE. 325
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0792663 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACNAIR, CHRISTOPHER J.
C/O BAYSHORE LAND GROUP, INC.
255 ALHAMBRA CIR. STE. 325
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MACNAIR, CHRISTOPHER J
C/O BAYSHORE LAND GROUP, INC.
255 ALHAMBRA CIR. STE. 325
CORAL GABLES, FL US US

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: CHRISTOPHER J. MACNAIR 01/07/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MACNAIR, CHRISTOPHER J
Address: 255 ALHAMBRA CIR.STE. 325
City-St-Zip: CORAL GABLES, FL 33134

Title: DV ( ) Delete
Name: FERTIG, JAY
Address: 255 ALHAMBRA CIR. STE. 325
City-St-Zip: CORAL GABLES, FL 33134

Title: DVST ( ) Delete
Name: SOFFER, MARSHA
Address: 2875 NE 191 ST., STE. 400
City-St-Zip: AVENTURA, FL 33180

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER J. MACNAIR DP 01/07/2005
Electronic Signature of Signing Officer or Director Date