

04-14-2003 90737 021 ***70.00

**2003 NOT-FOR-PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N99000002424

1. Entry Name
RESIDENCE 1611 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
 C/O BLUE SKY PROPERTY MANAGEMENT
 7300 BISCAYNE BLVD., STE. 206
 MIAMI, FL 33138-5135 US

Mailing Address
 C/O BLUE SKY PROPERTY MANAGEMENT
 7300 BISCAYNE BLVD., STE. 206
 MIAMI, FL 33138-5135 US

2. Principal Place of Business
723 14th PL
 Suite, Apt. #, etc.
STE 9

3. Mailing Address
C/O Blue Sky Real Estate Management
 Suite, Apt. #, etc.
723 14th PL

City & State
MIAMI BEACH FL

City & State
STE 9 MIA Bch

Zip
33139

Zip
33139

4. FEI Number
65-1008293

5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BLUE SKY PROPERTY MANAGEMENT
 7300 BISCAYNE BLVD., STE. 206
 MIAMI, FL 33138-5135

7. Name and Address of New Registered Agent
 Name: **Blue Sky Real Estate Management, INC**
 Street Address (P.O. Box Number is Not Acceptable)
723 14th PL STE 9
 City: **MIAMI BEACH**
 FL Zip Code: **33139**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* DATE: **4-6-03**

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KAUDERER, MALLORY 600 15 ST #1 MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAUREEN, STEIN 1611 EUCLED AVE #17 MIAMI, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERGUSON, J.D. 1611 EUCLID AVE #15 MIAMI, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATRICIA MACISAAC PO Box 191677 MIAMI BEACH, FL 33139	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *J.D. Ferguson* DATE: **4/6/03** 305 992-4702