

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762150

FILED  
Jan 09, 2004  
Secretary of State

Entity Name: 437 SANTANDER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

437 SANTANDER AVE. APT. F  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

437 SANTANDER AVE. APT. F  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 59-2176377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILONE, MAGDA U  
437 SANTANDER AVE. APT. F  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

LEHENBAUER, JAMES C  
437 SANTANDER AVE.  
#B  
CORAL GABLES, FL 33134 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: JAMES C. LEHENBAUER

01/09/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PAUL, TONY  
Address: 437-E SANTANDER AVE.  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD ( ) Delete  
Name: MILONE, MAGDA  
Address: 437 SANTANDER AVE APT F  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD ( ) Delete  
Name: MILONE, MAGDA  
Address: 437 SANTANDER AVE. APT. F  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete  
Name: IOANNIDES, ANN  
Address: 437 SANTANDER AVENUE, APT. G  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PAUL, TONY  
Address: 437 SANTANDER AVE. APT C  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD (X) Change ( ) Addition  
Name: LEHENBAUER, JAMES C  
Address: 437 SANTANDER AVE APT B  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change ( ) Addition  
Name: JANOSI, ALICE  
Address: 437 SANTANDER AVENUE, APT. D  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD (X) Change ( ) Addition  
Name: MILONE, MAGDA  
Address: 437 SANTANDER AVENUE, APT. F  
City-St-Zip: CORAL GABLES, FL 33134

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: JAMES C. LEHENBAUER

VPD

01/09/2004

Electronic Signature of Signing Officer or Director

Date