## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # NO 1000001163**

1. Entity Name

MASADA CONDOMINIUM ASSOCIATION INC.



FILED Feb 11, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

3901 INDIAN CREEK DR, BOX 518 MIAMI BEACH, FL 33140 3901 INDIAN CREEK DR, BOX 518 MIAMI BEACH, FL 33140



## DO NOT WRITE IN THIS SPACE

01252004 No Chg-NP CP2E037 (10/03)

4. FEI Number 65-0349429 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERGER, WILLIAM 3901 INDIAN CREEK DR, #308 MIAMI BEACH, FL 33140

## DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its registered once or registered agent, or oosh, in the state of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	TURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registrated			required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2004	<ol> <li>Election Campaign Financ Trust Fund Contribution.</li> </ol>	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS			,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERGER, WILLIAM 3901 INDIAN CREEK DR, #308 MIAMI BEACH, FL 33140				U00000045944
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAMINER, EUGENE 3901 INDIAN CREEK DR, #408 MIAMI BEACH, FL 33140	277		. <u></u>	02/11/04-80082-017 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KALISCH, JACOB 3901 INDIAN CREEK DR, #305 MIAMI BEACH, FL 33140	,- ···		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST - ZEP	D WEIDBERG, DAVID 3901 INDIAN CREEK DR, #403 MIAMI BEACH, FL 33140			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEDINA, TERESA 3901 INDIAN CREEK DR, #506 MIAMI BEACH, FL 33140				
TITLE HAME STREET ADDRESS CITY-ST-ZIP	D KLEIN, IRENE 3901 INDIAN CREEK DR, #207 MIAMI BEACH, FL 33140				
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 by 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 appliess, with all other like empowered.					