2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State
05-17-2004 90017 007 ****61.25

DOCUMENT # 710368

1. Entity Name
THIRD MOORINGS CONDOMINIUM, INC.

24076244

Principal Place of Business	Mailing Address
1501 NORTH EAST MIAMI GARDENS DRIVE 146 NO. MIAMI BEACH, FL 33179	1501 NORTH EAST MIAMI GARDENS DRIVE 146 NO. MIAMI BEACH, FL 33179

05112004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
1501 N.E. MIAMI GARDENS DRIVE	1501 N.E. MIAMI GARDENS DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FLORIDA	City & State: MIAMI, FLORIDA
Zip: 33179 Country: U.S.A.	Zip: 33179 Country: U.S.A.

4. FEI Number 59-1160715 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GUERRA, JUAN
1501 NE MIAMI GARDENS DR. #146
NORTH MIAMI BEACH, FL 33179

7. Name and Address of New Registered Agent

Name: Shendell & Associates, P.A.
Street Address (P.O. Box Number is Not Acceptable): 3650 North Federal Highway
Suite 202
City: Lighthouse Point FL Zip Code: 33064

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 _____ 5-14-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GUERRA, JUAN 1501 NE MIAMI GARDENS DR. APT 146 NORTH MIAMI BEACH, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DEBORAH HAYDEN 1501 N.E. MIAMI GARDENS DR. APT 151 MIAMI, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD STANLEY, GILBERT 1501 NE MIAMI GARDENS DR. APT 148 N. MIAMI BEACH, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ARLINE, MCBRIDE 1501 NE. MIAMI GARDENS DR. C 138 N. MIAMI BEACH, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD EVA ANDRADE 1501 N.E. MIAMI GARDENS DR. APT 351	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DINKINS, MICHELLE 1501 NE MIAMI GARDENS DR. APT 244 NORTH MIAMI BEACH, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEELING, FRANCISCO 1501 NE. MIAMI GARDEN DR. APT C NORTH MIAMI BEACH, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NELBA OROZCO 1501 N.E. MIAMI GARDENS DR. APT 347 MIAMI, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALDANA, AURA 1501 NE MIAMI GARDENS DR. APT 353 NORTH MIAMI BEACH, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JORGE CHECKLEY 1501 N.E. MIAMI GARDENS DR. APT 255 MIAMI, FL 33179	☐ Change ☐ 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: Deborah Hayden DEBORAH HAYDEN 05/10/04 (305) 947-1671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #