

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90099 028 ****61.25

DOCUMENT # 717409

1. Entity Name

ROLLING GREEN CONDOMINIUM A, INC.



Principal Place of Business
1701 N.E. 191ST STREET
MIAMI FL 33179

Mailing Address
1701 N.E. 191ST STREET
MIAMI FL 33179



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-1309390

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROUGH, CHADROW & LEVINE, P.A.
GLOBAL COMMERCE CENTER
1900 NORTH COMMERCE PARKWAY
WESTON FL 33326

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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 PD
NAME BYRD, BEATRICE
STREET ADDRESS 1701 N.E. 191 ST.
CITY-ST-ZIP N MIAMI BEACH FL ☐ Delete

TITLE D
NAME RUIZ, JUSTO S
STREET ADDRESS 1701 N.E. 191ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☐ Delete

TITLE TD
NAME BREMEN, BERNICE
STREET ADDRESS 1701 N.E. 191 ST.
CITY-ST-ZIP N MIAMI BEACH FL ☐ Delete

TITLE SD
NAME KAY, MYRA
STREET ADDRESS 1701 N.E. 191 ST.
CITY-ST-ZIP N MIAMI BEACH FL 33179 ☒ Delete

TITLE VD
NAME FALLAS, LUIS G
STREET ADDRESS 1701 N.E. 191ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☐ Delete

TITLE D
NAME JACOBS, MURRAY
STREET ADDRESS 1701 N.E. 191ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME RUIZ, JUSTO S
STREET ADDRESS 1701 N.E. 191ST
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME FALLAS, LUIS G
STREET ADDRESS 1701 N.E. 191ST
CITY-ST-ZIP N MIAMI BEACH FL 33179

TITLE ☒ Change ☐ Addition
NAME SECRETARY
STREET ADDRESS N MIAMI BEACH
CITY-ST-ZIP 1701 N.E. 191ST #302
N MIAMI BEACH FL 33179

TITLE ☐ Change ☒ Addition
NAME CHAVEZ, TIMOTHY
STREET ADDRESS 1701 N.E. 191ST
CITY-ST-ZIP N MIAMI BEACH FL 33179

TITLE ☐ Change ☒ Addition
NAME PEREZ, RALPH
STREET ADDRESS 1701 N.E. 191ST
CITY-ST-ZIP N MIAMI BEACH FL

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Beatrice G. Byrd BEATRICE G. Byrd 7.18.05 305-947-4662