

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728144

FILED
Jan 04, 2006
Secretary of State

Entity Name: BAY PARK TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3301 N.E. 5TH AVENUE
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

3301 N.E. 5TH AVENUE
MIAMI, FL 33137

New Mailing Address:

FEI Number: 59-1603811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGIDA, ALAN
3301 NE 5TH AVENUE
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

MAGIDA, ALAN B
3301 NE 5TH AVENUE
MIAMI, FL 33137 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: ALAN B, MAGIDA

01/04/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAGIDA, ALAN
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: SALIMBENIS, WALTER
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: TD () Delete
Name: RESTREPO, ALEJANDRO
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: DI ROCCO, MARIE
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: TD () Delete
Name: RESTREPO, ALEJANDRO
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAGIDA, ALAN B
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GRAELLS, LAZARO
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ALAN B. MAGIDA

PD

01/04/2006

Electronic Signature of Signing Officer or Director

Date