

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Aug 11, 2006 8:00 am**  
**Secretary of State**

07-31-2006 90008 011 \*\*\*\*61.25

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2nd MOORE CR2E037 (4/06)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                     |                                                             |                                                                                                                                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 717409</b><br>1. Entity Name<br>ROLLING GREEN CONDOMINIUM A, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                     |                                                             |                                                                                                                                  |  |
| Principal Place of Business<br>1701 N.E. 191ST STREET<br>MIAMI FL 33179                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                          |                                                                                     | Mailing Address<br>1701 N.E. 191ST STREET<br>MIAMI FL 33179 |                                                                                                                                  |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                          |                                                                                     | 3. Mailing Address<br>Suite, Apt. #, etc.                   |                                                                                                                                  |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                     | City & State                                                |                                                                                                                                  |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          | Country                                                                             |                                                             | 4. FEI Number<br>59-1309390                                                                                                      |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          |                                                                                     |                                                             | Applied For<br>Not Applicable                                                                                                    |  |
| 5. Name and Address of Current Registered Agent<br>BROUGH, CHADROW & LEVINE, P.A.<br>GLOBAL COMMERCE CENTER<br>1900 NORTH COMMERCE PARKWAY<br>WESTON FL 33326                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                     |                                                             | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                     |                                                             |                                                                                                                                  |  |
| <b>FILE NOW: FEE IS \$61.25</b><br><b>Due By September 6, 2006</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                             | \$5.00 May Be<br>Added to Fees                                                                                                   |  |
| Make Check Payable to<br>Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          |                                                                                     |                                                             |                                                                                                                                  |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                          |                                                                                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10       |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PD<br>BYRD, BEATRICE<br>1701 N.E. 191 ST. #120<br>N MIAMI BEACH FL       | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | VD<br>RUIZ, JUSTO<br>1701 N.E. 191ST. #310<br>NORTH MIAMI BEACH FL 33179 | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D<br>FALLAS, LUIS G.<br>1701 N.E. 191 ST. #115<br>N MIAMI BEACH FL       | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | S<br>NOAMI, MATOS<br>1701 NE 191 ST # 302<br>NORTH MIAMI BEACH FL 33179  | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D<br>CHAVEZ, TIMOTHY<br>1701 NE 191ST #411<br>NORTH MIAMI BEACH FL 33179 | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D<br>PEREZ, RALPH<br>1701 NE 191ST #112<br>NORTH MIAMI BEACH FL 33179    | <input type="checkbox"/> Delete                                                     |                                                             |                                                                                                                                  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TREAS.<br>BARMEN, BERNICE<br>1701 NE 191ST #105<br>N MIAMI BEACH FL      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition        |                                                             |                                                                                                                                  |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Beatrice G. Byrd</i> 8-7-06 305. 947.4662<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                     |                                                             |                                                                                                                                  |  |