2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003132

FILED Jan 04, 2007 Secretary of State

Entity Name: NORTH TOWER AT THE POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 21205 YACHT CLUB DR MGT. OFFICE AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 21205 YACHT CLUB DR MGT. OFFICE AVENTURA, FL 33180 FEI Number: 65-0665268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERMAN, HARLAN 21205 YACHT CLUB DRIVE #1602 AVENTURA, FL 33180 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete HERMAN, HARLAN Name: HERMAN, HARLAN M Name: 21205 YACHT CLUB DRIVE #1602 Address: 21205 YACHT CLUB DRIVE #1602 Address: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition BLANK, FREDRIC Name: Name: Address: 21205 WEST AVENUE APT 1704 Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: (X) Change () Addition HENIGMAN, JAMES HENIGMAN, JAMES Name: Name: 21205 NE 37 AVENUE APT 1704 21205 NE 37 AVENUE APT 1701 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 (X) Change () Addition Title: SD () Delete Title: D Name: STEIN, HOWARD Name: SMITHE, BRANDON 21205 YACHT CLUB DRIVE # 904 21205 YACHT CLUB DRIVE # 1401 Address: Address: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: (X) Change () Addition WAX, SONDRA WAX, SONDRA Name: Name: 21205 YACHT CLUB DR #2008 21205 YACHT CLUB DR #2008 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180

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: HARLAN M. HERMAN PD 01/04/2007