2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State
01-22-2007 90104 037 ****61.25

DOCUMENT # 714602

1. Entity Name
THE ADMIRAL FARRAGUT CONDOMINIUM APARTMENTS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O NANCY C. MORGAN 6815 EDGEWATER DR., APT. 202 CORAL GABLES, FL 33133	6815 EDGEWATER DR, # 202 CORAL GABLES, FL 33133

01092007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1723049 ☐ 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
MORGAN, NANCY C. 6815 EDGEWATER DR, # 202 CORAL GABLES, FL 33133	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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	SD ~~GONZALEZ, ARLETTE~~ ~~6815 EDGEWATER DR 104~~ ~~CORAL GABLES, FL 33133~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ZERPA, JORGE 6815 EDGEWATER DR 106 CORAL GABLES, FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORGAN, NANCY 6815 EDGEWATER DR., # 202 CORAL GABLES, FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~GAMALAS, KATHERINE~~ ~~6815 EDGEWATER DR 301~~ ~~MIAMI, FL 33133~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP CRISTINA PADRON TOFFOLI 6815 EDGEWATER DR 108 CORAL GABLES, FL 33133	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~PERSDA, LUIS~~ 6815 EDGEWATER DR ~~304~~ CORAL SPRINGS, FL 33133	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT RAYMOND KHACHAB 6815 EDGEWATER DR 206 CORAL GABLES, FL 33133	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Nancy C. Morgan (NANCY C. MORGAN) 1/10/07 305-443-8973
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #