2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000012249

FILED Feb 16, 2007 8:00 am Secretary of State

02-16-2007 90043 025 ****61.25

1. Entity Nam 360 MAR	ne LINA ASSOCIATION, INC.									
Principal Place of Business 730 N.W. 107 AVENUE FOURTH FLOOR MIAMI, FL 33172		Mailing Address 730 N.W. 107 AVENUE FOURTH FLOOR MIAMI, FL 33172			40	01952		ETIL ie de Frai		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01172007 CH	ng-NP	CR2E037 (12/06)			
City & State		City & State			4. FEI Number 20-393209	4		oplied For ot Applicable		
Zip	Country	Zip	Country		5. Certificate of St		S8.75 Ad Fee Require			
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
PATRICIA KIMBALL FLETCHER, P.A. 200 SOUTH BISCAYNE BLVD				Name Lennar Developers Inc. Street Address (P.O. Box Number is Not Acceptable)						
SUITE 340				, 100 100 (1	7.5. 50X 116.11601 10 1					
MIAMI, FL 33131			-	730 NW 107th Avenue, 4th FL				FL		
				City (A) (iM) FI Zip Code						
8 The above	named entity submits this statement for	or the nurouse of changing it	s repistered office	or renistere	ad agent, or both, in	the State of E	lorida Lam familiar with	and accord		
	tions of registered agent.	or time porposed a crisinging it	I isicrea singe	or registere	to agent, or both, in	ine diale of t	onda. Fannemilla with	and accept		
			1							
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable (Ng	TE Registered Agent sign	vature required i	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2007		ampaign Financing Contribution.	_	\$5.00 May Be Added to Fees		Make check payable trida Department of S			
10.	OFFICERS AND D		11.	А	DDITIONS/CHANG	ES TO OFFICI	ERS AND DIRECTORS II	N 10		
TITLE	PD HENDERSON, MERCEDES	Delete	TATLE	Posi	Cicuoz f	mel	☐ Change	Addition		
STREET ADDRESS	730 N.W. 107 AVENUE, FOURT	H FLOOR	STREET ADDRESS	730	I IGUEZ, P NW IOTH A	unul.	4MFL			
CITY-SI-ZIP MIAMI, FL 33172			CITY-ST-ZIP	MiG	MI, FL 3	3172				
TITLE	VPD	☐ Oelete	TITLE	IVD			Change	Addition		
NAME	MCPHERSON, GREG	11 EL 00B	NAME	THE PT	era, Mari	A CON	Jirio(
STREET ADDRESS 730 N.W. 107 AVENUE, FOURTH FLOOR CITY-ST-ZIP MIAMI, FL 33172			STREET ADDRESS CITY-ST-ZIP	MIC	mi, FL 3	フロン	L, 4th FL			
TITLE	STD	☑ Delete	TELLE	IUST			☐ Change	Addition		
NAME	AVILA, MIGUEL	E Poitit	NAME		and, Rad	nel	Orlange	E HOURION		
STREET ADDRESS	730 N.W. 107 AVENUE, FOURT	H FLOOR	STREET ADDRESS	730	NW 107th	Avenu	il, 4th FL			
CITY-ST-ZIP	MIAMI, FL 33172		CITY-SI-ZIP	Mia	imi, FL331	<u> 7</u>				
TITLE		☐ Delete	TITLE				☐ Change	Addition		

12. Thereby 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.

NAME

TITLE

NAME

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Defete

1/18/07

Daytime Phone #

☐ Change

☐ Change

Addition

■ Addition