2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710950

FILED Mar 19, 2009 Secretary of State

Entity Name: FIRST MOORINGS CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O FOUR POINTS PROPERTY MANAGEMENT, INC. 790 WEST 20TH ST, 2ND FLOOR HIALEAH, FL 33010

New Mailing Address: Current Mailing Address:

C/O FOUR POINTS PROPERTY MANAGEMENT, INC. 790 WEST 20TH ST, 2ND FLOOR HIALEAH, FL 33010

FEI Number: 59-1166747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FOUR POINTS PROPERTY MGMT 790 WEST 20 STREET, 2ND FLOOR HIALEAH, FL 33010

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 PRANDA, GALE ROTONDI, FERNANDINO Name: Name: 1501 NE 183 STREET #357 Address: 790 WEST 20TH STREET Address:

City-St-Zip: MIAMI, FL 33179 City-St-Zip: HIALEAH, FL 33010

(X) Change () Addition Title: PD Title: () Delete Name:

SUAREZ, EDGAR Name: SUAREZ, EDGAR Address: 1591 NE MIAMI GARDENS DR #210 Address: 790 WEST 20TH STREET City-St-Zip: MIAMI, FL 33179 City-St-Zip: HIALEAH, FL 33010

Title: () Delete Title: (X) Change () Addition

REYNOLDS, MIREYA Name: REYNOSO, MIREYA Name: 1591 NE MIAMI GARDENS DR #312 Address: Address: 790 WEST 20TH STREET City-St-Zip: MIAMI, FL 33179 City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify 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: MIREYA REYNOSO Ρ 03/19/2009