

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008451

FILED
Mar 09, 2009
Secretary of State

Entity Name: 18201 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18201 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18201 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 26-3441737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREYFUSS, KENNETH R
201 ALHAMBRA CIRCLE
SUITE 601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: DEZER, GIL
Address: 18201 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VD () Delete
Name: DEZER, ESTEE
Address: 18201 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: STD () Delete
Name: SALMON, LESLIE
Address: 18201 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEZER, GIL
Address: 18001 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VD (X) Change () Addition
Name: DEZER, ESTEE
Address: 18001 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: STD (X) Change () Addition
Name: SALMON, LESLIE
Address: 18001 COLLINS AVENUE, 31ST FLOOR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: DAVID KONSENS

MGR

03/09/2009

Electronic Signature of Signing Officer or Director

Date