above, or on an attachment with all other like empowered. SIGNATURE: ELAINE KILLEEN

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003189

Entity Name: 9140 COLLINS CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

9140 COLLINS AVE M SURFSIDE, FL 33154

Current Mailing Address:

9140 COLLINS AVE M SURFSIDE, FL 33154

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

KILLEEN, ELAINE 9140 COLLINS AVE APT M SURFSIDE, FL 33154 US

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

Officer/Director Detail :

Title	Р	Title	V
Name	KILLEEN, ELAINE	Name	DIPOPOLO, MARIO
Address	9140 COLLINS AVE. APT M	Address	9140 COLLINS AVE. APT E
City-State-Zip:	SURFSIDE FL 33154	City-State-Zip:	SURFSIDE FL 33154
Title	S.	Title	т
Title Name	S. CICCONE, MARGARET	Title Name	T VALENTINO, GERALD
			T VALENTINO, GERALD 9140 COLLINS AVE. APT J
Name	CICCONE, MARGARET 9140 COLLINS AVE. APT A	Name	,

ELAINE KILLEEN PRESIDENT

I hereby 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

FILED Mar 27, 2014 Secretary of State CC2786152545

Certificate of Status Desired: No

03/27/2014 Date

Date