## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 707557** 

Apr 27, 2005 Secretary of State

Entity Name: NONNIE SUE INC., A CONDOMINIUM

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

543 MERIDIAN AVENUE MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

309 23RD STREET 309 23RD STREET #3-B #300

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: 59-6169446 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

REGATTOA REAL ESTATE MGMT INC 309 23RD STREET STE #3B REGATTA REAL ESTATE MGMT INC 309 23RD STREET

MIAMI BEACH, FL 33139 US #300 MIAMI BEACH, FL 33139 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: TIM VODA 04/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:MARTINES, ALFREDName:VERDASCO, LAZAROAddress:543 MERIDIAN AVENUEAddress:543 MERIDIAN AVENUECity-St-Zip:MIAMI BEACH, FL 33139City-St-Zip:MIAMI BEACH, FL 33139

Title: DS ( ) Delete Title: ( ) Change ( ) Addition Name: GOMEZ, AMERICA Name:

 Name:
 GOMEZ, AMERICA
 Name:

 Address:
 543 MERIDIAN AVENUE
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

Name: MENN, KURT Name: LUES, MARIA
Address: 543 MERIDIAN AVENUE Address: 543 MERIDIAN AVENUE

Address: 543 MERIDIAN AVENUE Address: 543 MERIDIAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

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

 Name:
 VODA, TIM
 Name:

 Address:
 309 23RD STREET STE #3B
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAZARO VERDASCO P 04/27/2005