

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707685

FILED
Apr 28, 2006
Secretary of State

Entity Name: PENN MANOR CONDOMINIUM, INC.

Current Principal Place of Business:

PENN MANOR CONDO
1420 PENNSYLVANIA AVE
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

PENN MANOR CONDO
P.O. BOX 191904
MIAMI BEACH, FL 33119 US

New Mailing Address:

FEI Number: 65-0207015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, STUART
1420 PENNSYLVANIA #302
MIAMI BEACH, FL 33139 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: REED, STUART
Address: 1420 PENNSYLVANIA AVE #302
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: WOLFRAM, BRUCE
Address: 1420 PENNSYLVANIA AVE #201
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: MOY, JAMES
Address: 1420 PENNSYLVANIA AVE. #208
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: NAVASCUES, CESAR
Address: 501 NE 101 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: D (X) Delete
Name: ALVAREZ, CARLOS J
Address: 1420 PENNSYLVANIA AVE., #202
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: ALVAREZ, CARLOS
Address: 1420 PENNSYLVANIA AVE #202
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STUART REED

PD

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date