2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709974

FILED Mar 14, 2007 Secretary of State

Entity Name: SECOND MOORINGS CONDOMINIUM INC

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

1551 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

1551 NE MIAMI GARDENS DRIVE #337 NORTH MIAMI BEACH, FL 33179 US

FEI Number: 59-1160713 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:

WAND, NORMAN 1551 NE MIAMI GARDENS DR 320

NORTH MIAMI BEACH, FL 33179 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:

Flacture of Decision of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PTD (X) Change () Addition Name: SACHS, HAROLD Name: WAND, NORMAN Address: 1551 NE MIAMI GARDENS Address: 1551 NE MIAMI GARDENS

City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

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

Name: KALB, JEAN Name: GOLDINER, IRVING

Address: 1551 NE MIAMI GARDENS Address: 1551 NE MIAMI GARDENS
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: PTD () Delete Title: S (X) Change () Addition Name: WAND, NORMAN Name: SULLIVAN, LISA

Address: 1551 NE MIAMI GARDENS DR Address: 1551 NE MIAMI GARDENS DR

City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: D () Delete Title: D (X) Change () Addition
Name: LONG, MARILYN Name: CRUZ, VICTOR

Address: 1551 NE MIAMI GARDENS DR Address: 1551 NE MIAMI GARDENS DR

City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: CRUZ, VICTOR Name: COHEN, MIRIAM

Address: 1551 NE MIAMI GARDENS DR Address: 1551 NE MIAMI GARDENS DR
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

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

Name: GORANITIS, CHRIS Name: KALB, JEAN

Address: 1551 NE MIAMI GARDENS DR Address: 1551 NE MIAMI GARDENS DR
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

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: NORMAN WAND PRES 03/14/2007