

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 710818

1. Entity Name
9300 WEST BAY HARBOR DRIVE CONDOMINIUM, INC.



Principal Place of Business
9300 WEST BAY HARBOR DRIVE
#4-B
BAY HARBOR ISLANDS, FL 33154 US

Mailing Address
9300 W BAY HARBOR DRIVE,
APT. 4-B
BAY HARBORS ISLANDS, FL 33154 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07122006

Chg-NP

CR2E037 (4/06)

4. FEI Number
59-1154462

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WALLACE, ILEENE S
9300 WEST BAY HARBOR DRIVE
4-B
BAY HARBOR ISLAND, FL 33154

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

400077964084

07/25/06--01053--005 **\$61.25

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LIPTON, DELSIE ☐ Delete
STREET ADDRESS 9300 W BAY HARBOR DRIVE, #2B
CITY-ST-ZIP BAY HARBOR ISL, FL 33154

TITLE SD ☒ Delete
NAME MORRIS, MYNRA
STREET ADDRESS 9300 W BAY HARBOR DR
CITY-ST-ZIP BAY HARBOR ISL, FL 33154

TITLE TD ☐ Delete
NAME WALLACE, ILEENE S
STREET ADDRESS 9300 WEST BAY HARBOR DRIVE
CITY-ST-ZIP BAY HARBOR ISL, FL 33154

TITLE D ☒ Delete
NAME ZUSMER, ROXIE
STREET ADDRESS 9300 BAY HARBOR DRIVE, # 1B
CITY-ST-ZIP BAY HARBOR, FL 33154

TITLE D ☒ Delete
NAME ROBERTS, ED
STREET ADDRESS 9300 BAY HARBOR DRIVE, # 2A
CITY-ST-ZIP BAY HARBOR, FL 33154

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Julio GORFINKEL
STREET ADDRESS 9300 W. BAY HARBOR DR., 1A
CITY-ST-ZIP BAY HARBOR ISL., FL 33154

TITLE SD ☐ Change ☒ Addition
NAME NORMA OROVITZ
STREET ADDRESS 9300 W. BAY HARBOR DR., 2A
CITY-ST-ZIP BAY HARBOR ISL., FL 33154

TITLE D ☐ Change ☒ Addition
NAME NOEL ZUSMER
STREET ADDRESS 9300 WEST BAY HARBOR DR., 1B
CITY-ST-ZIP BAY HARBOR ISL., FL 33154

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ilene S Wallace
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/06 305/864-8614
Date Daytime Phone #

APPROVED
AND
FILED

06 JUL 20 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FL 32399



FSR