2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712111

Entity Name: SIXTH MOORINGS CONDOMINIUM, INC.

Apr 25, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

18555 N.E. 14TH AVENUE NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

18555 N.E. 14TH AVENUE NORTH MIAMI BEACH, FL 33179

FEI Number: 59-1204711 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:

OAKES, MARIA A 18555 NE 14 AVE N MIAMI BEACH, FL 33179

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ACOSTA, TERESA ACOSTA, TERESA Name: Name: 18555 NE 14 AVE STE 508 Address: 18555 NE 14 AVE STE 508 Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: NORTH MIAMI, FL 33179

Title: DS () Delete Title: (X) Change () Addition CARBONELL, EMILIO Name: ZACARIAS, RESILDA Name:

Address: 18555 NE 14 AVE STE 713 Address: 18555 NE 14 AVE STE 619 City-St-Zip: N MIAMI, FL 33179 City-St-Zip: NORTH MIAMI, FL 33179

Title: DVP () Delete Title: (X) Change () Addition KOBLE, JOHN Name: GOCH, GERALD Name:

18555 N.E. 14TH AVENUE # 702-B 18555 NE 14TH AVENUE, #706 Address: Address:

City-St-Zip: N MIAMI BEACH, FL 33179 City-St-Zip: N MIAMI, FL 33179

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

OAKES, MARIA A Name: Name: OAKES, MARIA A 18555 NORTHEAST 14 AVE 18555 NORTHEAST 14 AVE Address: Address:

City-St-Zip: N MIAMI BCH, FL City-St-Zip: NORTH MIAMI, FL 33179

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

SESSEGO, QUINTO SESSEGO, QUINTO Name: Name: 18555 NE 14 AVE STE 620 18555 NE 14 AVE STE 620 Address: Address: City-St-Zip: N. MIAMI, FL 33179 City-St-Zip: NORTH MIAMI, FL 33179

I hereby certify that the information supplied with this filing does not qualify 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: GERALD GOCH Ρ 04/25/2009