

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715311

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: 1401 EUCLID CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1401 EUCLID AVENUE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

220 71ST  
222  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 59-1712166      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

THE CONDO MANAGEMENT  
220 71ST  
222  
MIAMI BEACH, FL 33137 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: MONEYHAM, JACK  
Address: 1401 EUCLID AV #502  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD ( ) Delete  
Name: BALLINA, RAUL  
Address: 1401 EUCLID AV #501  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD (X) Delete  
Name: PIVA, ANNA  
Address: 1401 EUCLID AV #404  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Delete  
Name: BADAELIACCA, EIOVANNA  
Address: 1401 EUCLID AV #203  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BADAELIACCA, EIOVANNA  
Address: 1401 EUCLID AV #203  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD (X) Change ( ) Addition  
Name: PIVA, ANNA  
Address: 1401 EUCLID AV #404  
City-St-Zip: MIAMI BEACH, FL 33139

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 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: ANNA PIVA

VPD

04/10/2009

Electronic Signature of Signing Officer or Director

Date