## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # 717447  1. Entity Name ROLLING GREEN CONDOMINIUM H, INC.							4		04-28-2	.008 9	0384 01	3 ****61	.25
Principal Place of Business 1101 NE 191TH ST. SUITE 108 NORTH MIAMI BEACH, FL 33179 US		1101 Suite	Mailing Address 1101 NE 191TH ST. SUITE 108 NORTH MIAMI BEACH, FL 3317				<b>  1 </b>						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						<b>a</b> ii 1 <b>83</b> 11 81811					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					041820	800	Chg-NP		CR2E0	7 (12/06)	
City & State		City & State			4. FEI 59			umber 1305	387	_		<u> </u>	oplied For ot Applicable
Zip	Zip Country		Zip		intry		5. Certificate of Status Desired See Required \$8.75						
	6. Name and Address of Current	Registere	d Agent				7. Name	and A	ddress of	New R	egistered a	\gent	
DUPONT	ESO STEDHANE				Name								
DUPONT, ESQ, STEPHANE  1820 E. HALLANDALE BEACH BLVD  HALLANDALE, FL 33-009b						ddress (F	P.O. Box N	umber	is Not Acc	eptable	)		
					City						FL	Zip Cod	e
8 The decision		<del></del>			L		<del></del>						
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. SIGNATURE													
	Signature, typed or printed name of registered agent	and title if appl	cable. (NOTE	: Registere	d Agent signati	ure required	when reinstatin	rg)			DATE		
	Signature, typec or printee rame of registered apert Filling Fee is \$61.25 Due by May 1, 2008	and take if appl	9. Election Can Trust Fund C	npaign F	inancing		\$5.00 M Added to F	lay Be			ake chec	payable t	
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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

Pargaret Bradlers-Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23/08 305-347-73