2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 717754

FILED Jan 22, 2008 8:00 am Secretary of State

01-22-2008 90064 003 ****61.25

| 1. Entity Name STRATFORD HOUSE CONDOMINIUM, INC. | | | | | | |
|---|---|--|--|--|------------------------------|--|
| 2841 NE 163 ST. 284 | | Mailing Address 2841 NE 163 ST. NORTH MIAMI BEACH, F | L 33160 US | guv- | | |
| 2. Principal P | lace of Business - No P.O. Box # | 3. Mailing Address | | | | |
| Suite, Apt-#; etc | | Suite, Apt. #, etc. | · | 01182008 Chg-NP CR2E037 (12/06) | | |
| City & State | | City & State | _ | 50 400 4000 | lied For Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired | ional | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | | |
| LEPPO, TRACY (CAM) 2841 NE 163 ST NORTH MIAMI BEACH, FL 33160 | | | Name Street A | Name Street Address (P.O. Box Number is Not Acceptable) | | |
| NORTH IS | PART BEAGIT, I'E 33103 | | | | | |
| | | | City | FL Zip Code | | |
| | named entity submits this statement for ions of registered agent. Signature typed or printed name of registered agent is | | | registered agent, or both, in the State of Florida. I am familiar with, a - 18-08 DATE | nd accept | |
| Filing Fee is \$61.25 | | 9. Election Cam Trust Fund C | paign Financing | \$5.00 May Be Make check payable to Added to Fees Florida Department of Sta | te | |
| 40 | OFFICERS AND DIF | PECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN | | |
| 10. | VPD | | TITLE PD | | | |
| NAME | | Detete | | The same (20 hards Uhanne | Andition | |
| | LOSQUADRO, LEONARD | ☐ Delete | NAME F D | Thomas Palmer Change | Addition | |
| STREET ADDRESS | LOSQUADRO, LEONARD 2841 NW 163RD ST STE 1014 | ☐ Delete | NAME STREET ADDRESS | 2841 NE 163 St + 615 | Addition | |
| STREET ADDRESS CITY-ST-ZIP | 2841 NW 163RD ST STE 1014 NORTH MIAMI BEACH, FL 3316 | 0 | NAME STREET ADDRESS CITY-ST-ZIP | 2841 NEI 63 St + 615 N.M. Becch, FZ 33160 | | |
| CITY-ST-ZIP | 2841 NW 163RD ST STE 1014 NORTH MIAMI BEACH, FL 3316 PD | | STREET ADDRESS CITY-ST-ZIP | 2841 NE 163 St + 615 N.M. Broch, FZ 33160 Maribal Alanso Change | Addition | |
| CITY-ST-ZIP TITLE NAME | 2841 NW 163RD ST STE 1014 NORTH MIAMI BEACH, FL 3316 PD PICCOLO, GASPARE | 0 | STREET ADDRESS CITY-ST-ZIP TITLE SD NAME TD | 2841 NEI 63 St + 615 N.M. Brech, FE 33160 | | |
| CITY-ST-ZIP | 2841 NW 163RD ST STE 1014 NORTH MIAMI BEACH, FL 3316 PD PICCOLO, GASPARE 2841 NW 163RD ST STE 901 | 0 | STREET ADDRESS CITY-ST-ZIP | 2841 NE 163 St + 615 N.M. Brown, FR 33160 MAZIBEL Alonso Change 2841 NE 163 St 1709 | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS | 2841 NW 163RD ST STE 1014 NORTH MIAMI BEACH, FL 3316 PD PICCOLO, GASPARE | 0 | NAME STREET ADDRESS CITY-ST-ZIP TITLE SD NAME TD STREET ADDRESS CITY-ST-ZIP | 2841 NE 163 St + 615 N.M. Broch, FZ 33160 MAZIBEL ALONSO Change 2841 NE 163 St 1709 N.M.ami, Boh, FZ 33160 | | |
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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: Leonard Loughadus Los SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leonard Losquetro 1-18-05