

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718258

FILED
Jan 23, 2009
Secretary of State

Entity Name: BYRON GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

CONFERENCE ROOM
2ND FLR.
MIAMI BEACH, FL 33141

New Principal Place of Business:

7850 BYRON AVENUE
2ND FLR.
MIAMI BEACH, FL 33141

Current Mailing Address:

P.O. BOX 420336
SUITE C
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-1300927 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BENNETT, JOAN
763 41ST STREET
SUITE C
MIAMI BEACH, FL 33140 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: T/D () Delete
Name: DE LA VEGA, ALEJANDRO
Address: 7850 BARON AVE, # 1103
City-St-Zip: MIAMI BEACH, FL 33141

Title: P/D () Delete
Name: BADELT, JOSEPH
Address: 7850 BYRON AVE, STE 904
City-St-Zip: MIAMI BEACH, FL 33141

Title: S/D () Delete
Name: WEISBERG, MATHEW
Address: 7850 BYRON AVENUE #607
City-St-Zip: MIAMI BEACH, FL 33141

Title: DS () Delete
Name: CUBIA, CHRIS
Address: 7850 BYRON AVENUE #1107
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: LABRADO, LESTER
Address: 7850 BYRON AVENUE #902
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RONKOVIC, BABAN
Address: 7850 BYRON AVENUE #1107
City-St-Zip: MIAMI BEACH, FL 33141

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: JOSEPH BADELT

P

01/23/2009

Electronic Signature of Signing Officer or Director

_____ Date