## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997 DOCUMENT #

1. Corporation Name

718608

## JEFFERSON SOUTH SHORE CONDOMINIUM ASSOCIATION, I NC.

Principal Place of Business Mailing Address 726 ARTHUR GODFREY RD 726 ARTHUR GODREY RD MIAMI BCH FL 33140 MIAMI BCH FL 33140-3414 3. Date Incorporated or Qualified 3a. Date of Last Report US US 06/02/1970 04/19/1996 2. Principal Place of Business 2a. Maijing Address 4. FEI Number Applied For 59-2520308 Charles Silver CIO ( raligate MC Nasceman) Not Applicable \$8.75 Additional 5. Certificate of Status Desired O. Rox Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country This corporation has liability for intangible tax under s. 199,032. Yes No Florida Statutes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SILVER, CHARLES 62 Street Address (P.O. Box Number is Not Acceptable) **631 JEFFERSON AVE** 83 S204 MIAMI BCH FL 33139 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change NAME SILVER, CHARLES 1.2 NAME 631 JEFFERSON AVE S204 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 1.4 CITY-ST-2IP DELETE K Change TITLE 2.1 TITLE Addition RODRIGUEZ, JOSE NAME 2.2 NAME 631 JEFFERSON AVE S304 STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE VPD TITLE 3.1 TITLE Change Addition NAME Moretti, Brenno 3.2 NAME STREET ADDRESS 631 JEFFERSON AVE, #503 3.3 STREET ADORESS MIAMI BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE SD 4.1 TITLE Addition MARTINEZ, MIGUEL NAME 4. 2 NAME STREET ADDRESS 310 PONCE DE LEON BLVD 4.3 STREET ADDRESS CORAL GABLES FL CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP TITLE DELETE Change 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP /6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify funformation indicated on this anneal report or supplemental annual report is true I am an officer or director of the corporation or the receiver or trustee. for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the legal and accurate and that my signature shall have the same legal effect as if made under oath; that do execute this report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if and

**FILED** 

May 15 1997 8:00am

Secretary of State