2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# 725066

Entity Name: THE NORTHGATE CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business:

1701 N.E. 115 ST.
MIAMI, FL 33181 US

New Principal Place of Business:

Current Mailing Address:

1701 N.E. 115 ST.
MIAMI, FL 33181 US

New Mailing Address:

FEI Number: 59-1536806 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLAZER & ASSOCIATES, P.A.
1920 EAST HALLANDALE BEACH BLVD, STE 806
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

GLAZER & ASSOCIATES, P.A.
3113 STIRLING ROAD
SUITE 201
HOLLYWOOD, FL 33312 US

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: _____ 01/20/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DRIESBACH, DAVID W PD
Address: 1701 NE 115TH STREET #19A
City-St-Zip: MIAMI, FL 33181

Title: VD ( ) Delete
Name: LEWIS, KIMBERLY VD
Address: 1651 NE 115TH ST UNIT #35C
City-St-Zip: MIAMI, FL 33181

Title: TSD ( ) Delete
Name: STANTIC, DELINN TSD
Address: 1655 NE 115TH STREET #39B
City-St-Zip: MIAMI, FL 33181 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEWIS, KIMBERLY D PD
Address: 1651 NE 115 ST., #35
City-St-Zip: MIAMI, FL 33181 US

Title: VD (X) Change ( ) Addition
Name: HINOSTROZA, ELIANA VD
Address: 1701 NE 115 ST., #34
City-St-Zip: MIAMI, FL 33181 US

Title: TD (X) Change ( ) Addition
Name: REID, STEVE T
Address: 1655 NE 115 ST., #10
City-St-Zip: MIAMI, FL 33181 US

Title: SD ( ) Change (X) Addition
Name: LASTRELLA, MICHELLE T
Address: 1701 NE 115 ST., #5
City-St-Zip: MIAMI, FL 33181 US

Title: C ( ) Change (X) Addition
Name: HARRIGAN, BEVERLY C
Address: 1701 NE 115 ST., #35
City-St-Zip: MIAMI, FL 33181 US

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: KIMBERLY D. LEWIS PD 01/20/2009
Electronic Signature of Signing Officer or Director — Date