2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

FILED

04 SEP 27 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725082

1. Entity Name
WINSTON TOWERS 300 ASSOCIATION INC

Principal Place of Business	Mailing Address
230-174 ST. SUNNY ISLES BEACH, FL 33160	230-174 ST. MIAMI BEACH, FL 33160

09132004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
	230 174TH ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: SUNNY ISLES BEACH FL
Zip / Country	Zip: 33160 / Country

4. FEI Number: 59-1457500 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PIA, MARY A 230 174TH STREET SUNNY ISLES BEACH, FL 33160	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: Mary Ann Pia PROPERTY MANAGER — 9/24/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PASKOW, STUART 230 174 STREET APT. M-03 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOSEPH LIBERCHUK D 230 174 STREET APT 1002 SUNNY ISLES BEACH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEIDEN, LESTER 230 174TH UNIT 306 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MICHAEL SCHNITZER D 230 174TH ST. APT 2204 SUNNY ISLES BEACH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST DUBOFF, JEAN 230 174TH UNIT 605 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SOLO PRIESTER D 230 174TH STREET APT 2104 SUNNY ISLES BEACH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOLOMON, MARTIN 230 174 TH UNIO 1107 SUNNY ISLES BEACH, FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RENE GALINDO D 230 174TH ST. APT 2404 SUNNY ISLES BEACH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIVA, MARANC 230 174 TH UNIT M03 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10004145099I 09/29/04--01054--006 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POVEDA, LUIS 230 174 TH UNIT 2407 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Jean Duboff — 9/24/04 — 954-932-5290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #