

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725251

FILED
Apr 15, 2009
Secretary of State

Entity Name: THE CLIPPER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

880 N. E. 69TH STREET
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

880 N. E. 69TH STREET
MIAMI, FL 33138

New Mailing Address:

FEI Number: 59-1481556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH H. GANGUZZA & ASSOCIATES, P.A.
ONE S.E. THIRD AVENUE
SUITE 2150
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

ALEXIS GONZALEZ P.A.
9755 SW 40TH TERRACE
MIAMI, FL 33165 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: MARK BRYN

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: GREICO, JACK
Address: 1251 NE 94TH ST
City-St-Zip: MIAMI SHORES, FL

Title: PD () Delete
Name: BRYN, MARK
Address: 9120 W BAY HARBOR DR
City-St-Zip: BAY HARBOR, FL 33154

Title: D () Delete
Name: TOPLEY, MARK
Address: 880 NE 69TH ST
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: HOFFNER, LEONORE
Address: 880 NE 69TH ST
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: CASNER, ELIZABETH
Address: 880 NE 69TH STREET
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: ARSAN, RENE
Address: 880 NE 69TH ST
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GREICO, JACK
Address: 1251 NE 94TH ST
City-St-Zip: MIAMI SHORES, FL

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

Title: VD (X) Change () Addition
Name: TOPLEY, MARK
Address: 880 NE 69TH ST
City-St-Zip: MIAMI, FL 33138

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

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

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

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: MARK BRYN

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date