

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725288

FILED  
Jun 27, 2012  
Secretary of State

**Entity Name:** BRICKELL BAY CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ROBERT DEME  
2333 BRICKELL AVE.  
MIAMI, FL 33129 US

**New Principal Place of Business:**

C/O NORMAN GROSSMAN  
2333 BRICKELL AVE.  
MIAMI, FL 33129 US

**Current Mailing Address:**

C/O ROBERT DEME  
2333 BRICKELL AVE.  
MIAMI, FL 33129 US

**New Mailing Address:**

C/O NORMAN GROSSMAN  
2333 BRICKELL AVE.  
MIAMI, FL 33129 US

**FEI Number:** 59-1660037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGEL, DAVID  
C/O BECKER & POLIAKOFF, P.A.  
121 ALHAMBRA PLAZA, 10TH FLOOR  
CORAL GABLES, FL 33134 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: P  
Name: LEWIN, PAUL  
Address: 2333 BRICKELL AVE, 2802  
City-St-Zip: MIAMI, FL 33129

Title: VP  
Name: MARX, RICHARD B  
Address: 2333 BRICKELL AVE, TERRACE-A  
City-St-Zip: MIAMI, FL 33129

Title: TR  
Name: ESTAY, JULIO  
Address: 2333 BRICKELL AVE, 1101  
City-St-Zip: MIAMI, FL 33129

Title: SEC  
Name: TERRIS, MARTIN  
Address: 2333 BRICKELL AVENUE, 1412  
City-St-Zip: MIAMI, FL 33129

Title: DR  
Name: GONZALEZ-SANFELIU, CARMEN  
Address: 2333 BRICKELL AVE, 701  
City-St-Zip: MIAMI, FL 33129

Title: DR  
Name: MONCADA, OLGA W  
Address: 2333 BRICKELL AVENUE, 511  
City-St-Zip: MIAMI, FL 33129

I hereby 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 all other like empowered.

SIGNATURE: PAUL LEWIN

MR.

06/27/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date