

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725532

FILED
Jan 28, 2007
Secretary of State

Entity Name: RITTENHOUSE SQUARE CONDOMINIUM, INC.

Current Principal Place of Business:

6215 SW 78 STREET
SOUTH MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

6215 SW 78 STREET
SOUTH MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0756870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARSTARPHEN, LISA R
7548 SW 58 AVENUE
SOUTH MIAMI, FL 33143 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: DP () Delete
Name: JUDE, PETER
Address: 8325 SW 62 AVENUE
City-St-Zip: MIAMI, FL 33143

Title: DVP () Delete
Name: CARSTARPHEN, LISA
Address: 7548 SW 58 AVENUE
City-St-Zip: MIAMI, FL 33143

Title: DS () Delete
Name: REYNOLDS, LINDA
Address: 6221 SW 78 STREET
City-St-Zip: SOUTH MIAMI, FL 33143

Title: T () Delete
Name: KAPPAS, JOHN
Address: 6215 SW 78 STREET
City-St-Zip: SOUTH MIAMI, FL 33143

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: CARSTARPHEN, LISA
Address: 7548 SW 58 AVENUE
City-St-Zip: MIAMI, FL 33143

Title: DVP (X) Change () Addition
Name: ANDERSON, DICK
Address: 7751 SW 62 AVENUE
City-St-Zip: SOUTH MIAMI, FL 33143

Title: DT (X) Change () Addition
Name: KAPPAS, JOHN
Address: 6215 SW 78 STREET
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D () Change (X) Addition
Name: CHUPP, HELEN
Address: 6223 SW 78 STREET
City-St-Zip: SOUTH MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the 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: /S/ LISA R. CARSTARPHEN

DS

01/28/2007

Electronic Signature of Signing Officer or Director

Date