

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 12, 2009
Secretary of State**

DOCUMENT# 725576

Entity Name: FLAGLER PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3001 S.W. 2ND STREET
APT. 113-C
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

3001 S.W. 2ND STREET
APT. 113-C
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-1651473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, MANUEL R
3001 SOUTHWEST 2 STREET
SUITE 114C
MIAMI, FL 33135 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: VP () Delete
Name: BUSTAMANTE, IVAN
Address: 3001 SOUTHWEST 2 STREET SUITE 210C
City-St-Zip: MIAMI, FL 33135

Title: S () Delete
Name: BUSTAMANTE, IVAN
Address: 3001 S.W. S STREET, SUITE 210-C
City-St-Zip: MIAMI, FL 33135

Title: P () Delete
Name: ROBAINA, ANTONIA
Address: 145 S.W. 30 COURT, SUITE 109-B
City-St-Zip: MIAMI, FL 33135

Title: T () Delete
Name: SUAREZ, MANUEL R
Address: 3001S.W. 2 STREET, SUITE 114-C
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MANUEL SUAREZ

T

02/12/2009

Electronic Signature of Signing Officer or Director

Date