## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#726549** 

FILED Apr 11, 2006 Secretary of State

Entity Name: OMEGA CONDOMINIUM NO. 8, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7500 N.W. 17TH STREET PLANTATION, FL 333132174 **Current Mailing Address: New Mailing Address:** 7500 N.W. 17TH STREET PLANTATION, FL 333132174 FEI Number: 59-1559708 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERGMAN, A.C., CPA 7515 W. OÁKLAND PARK BLVD. LAUDERHILL, FL 33319 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CARMICHAEL, DEBBIE Name: Name: 7500 NW 17TH ST #205 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: () Delete Title: VPD (X) Change ( ) Addition GROSS, DOROTHY Name: MOMPLAISIR, ELAINE Name: Address: 7500 NW 17 ST. #205 Address: 7500 NW 17TH STREET #203 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313 Title: () Delete Title: () Change () Addition RUSSELL, SHANNA Name: Name: 7500 NW 17TH ST #104 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition GOLDWEITZ, PEARL GOLDWEITZ, PEARL Name: Name: Address: 7500 NW 17TH ST Address: 7500 NW 17TH ST #304 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313 Title: () Delete Title: (X) Change ( ) Addition GARRIGA, TOM YAGODNKI, LEWIS H Name: Name: 7500 NW 17 ST #205 7500 NW 17TH STREET #108 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313 Title: () Delete Title: () Change () Addition KENDALL, CARMELLA Name: Name: Address: 7500 NW 17TH ST #307 Address: PLANTATION, FL 33313 City-St-Zip: City-St-Zip:

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: ELAINE MOMPLAISIR VP 04/11/2006