2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727301

FILED Apr 16, 2009 Secretary of State

Entity Name: MAR-AZUL CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 600 GRAPETREE DRIVE KEY BISCAYNE, FL 33149 **Current Mailing Address: New Mailing Address:** 600 GRAPETREE DRIVE 600 GRAPETREE DRIVE KEY BISCAYNE, FL 33149 MANAGEMENT OFFICE KEY BISCAYNE, FL 33149 FEI Number: 59-1506805 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: LEWIS, ANDY PRESIDENTIAL CIRCLE 4000 HOLLYWOOD BLVD., SUITE 265 S HOLLYWOOD, FL 33021 ÚS 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: () Delete () Change () Addition CONILL, GUIDO Name: Name: 600 GRAPETREE DR, #8 AN Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: Title: () Delete Title: () Change () Addition PENICHET, JOCQUIN Name: Name: Address: 600 GRAPETREE DR. #9FS Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: Title: () Delete Title: (X) Change () Addition GOYTISOLO, JORGE Name: GARCIA-LAY, GUILLERMO Name: 600 GRAPETREE DR # 3DS 600 GRAPETREE DR # 3DS Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149 () Delete Title: \top Title: TT(X) Change () Addition HERNANDEZ, ALFRED HERNANDEZ, ALFREDO Name: Name: 600 GRAPETREE DR, # 60N 600 GRAPETREE DR, # 60N Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149 Title: () Delete Title: (X) Change () Addition ISIS, HOFFMAN DONALD, SHEILA Name: Name: 600 GRAPETREE DR, # 6EN 600 GRAPETREE DR, # 6EN Address: Address: KEY BISCAYNE, FL 33419 City-St-Zip: KEY BISCAYNE, FL 33419 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: GUIDO CONILL **PRES** 04/16/2009