2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State
03-31-2008 90037 028 ****61.25

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DOCUMENT # 727896

1. Entity Name
NORMANDY PLACE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2000 BIARRITZ DR. MIAMI BEACH, FL 33141	2000 BIARRITZ DR. MIAMI BEACH, FL 33141

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Four Points Property Mgmt, Inc.	Four Points Property Management, Inc.
Suite, Apt. #, etc. 790 West 20th Street	Suite, Apt. #, etc. 790 west 20th Street.
City & State Hialeah, Florida	City & State Hialeah, Florida
Zip 33010	Country USA
Zip 33010	Country USA

02062008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2262803
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LOVING, WILLIAM W 2000 BIARRITZ DR. APT 406 MIAMI BEACH, FL 33141	Name: Four Points Property Management, Inc. Street Address (P.O. Box Number is Not Acceptable): 790 West 20th Street City: Hialeah, FL Zip Code: 33010

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 3/19/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LOVING, WILLIAM W 2000 BIARRITZ DR., APT 406 MIAMI BEACH, FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President William Loving 790 west 20th Street Hialeah, FL 33010	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PALACIOS, MONICA 2000 BIARRITZ DR., #506 MIAMI BEACH, FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Nelson Suarez. 790 west 20th Street Hialeah, FL 33010.	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CINTRON, ODILE 2000 BIARRITZ DR., #404 MIAMI BEACH, FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Alex Suarez. 790 West 20th Street Hialeah, FL 33010.	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/19/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #