

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730569

FILED
Apr 18, 2008
Secretary of State

Entity Name: LAS OLAS CONDOMINIUM

Current Principal Place of Business:

7899 NE BAYSHORE COURT
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

7899 NE BAYSHORE COURT
MIAMI, FL 33138

New Mailing Address:

FEI Number: 59-1629693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REHR, MICHAEL ESQ
9500 S DADELAND BLVD, SUITE 550
MIAMI, FL 33156 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: PRES () Delete
Name: MAS, MARTA M
Address: 7899 NE BAYSHORE CT.
City-St-Zip: MIAMI, FL 33138

Title: VP () Delete
Name: WENDEL, WENDEL
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

Title: T () Delete
Name: VARGAS, BARBARA
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

Title: SEC () Delete
Name: KIMBERLY, MCCOY
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: BLANCO, MARTA
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: CARLA, BONILLA
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: PADOWITZ, PETER
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

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

Title: SEC (X) Change () Addition
Name: BONILLA, CARLA
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

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

Title: D (X) Change () Addition
Name: RELLIS, HILDA
Address: 7899 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33138

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: BARBARA VARGAS

T

04/18/2008

Electronic Signature of Signing Officer or Director

Date