

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 731854

1. Entity Name
THE ARBORS CONDOMINIUM ASSOCIATION, INC.



FILED

07 JAN 12 PH 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O ALHAMBRA PROPERTY MANAGEMENT
95 MERRICK WAY SUITE 500
CORAL GABLES, FL 33134 US

Mailing Address
C/O ALHAMBRA PROPERTY MANAGEMENT
95 MERRICK WAY SUITE 500
CORAL GABLES, FL 33134 US



2. Principal Place of Business
C/O Alhambra Prop Mgmt
Suite, Apt. #, etc.
12378 SW 82 Ave.
City & State
Pinecrest, FL
Zip
33156 Country

3. Mailing Address
C/O Alhambra Prop Mgmt
Suite, Apt. #, etc.
12378 SW 82 Ave.
City & State
Pinecrest, FL
Zip
33156 Country

11142006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-1685834

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BLAXBERG, BARRY
25 SE 2ND AVE, #730
MIAMI, FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 DATE 11/16/06

(NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25

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 | P HARDY, JENNIFER 5470 SW 76TH ST, #A MIAMI, FL 33143 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 600082647276 12/19/06--01054--008 **\$61.25 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V HEATLEY, T K 5101 SW 74 TERRACE MIAMI, FL 33143 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T NICHOLS, ALAN 8360 SW 108 STREET MIAMI, FL 33156 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Edgar Cooper Jones 7741 SW 55 Avenue A Miami, FL 33143 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S OLDHAM, ANDREA 5470 SW 76 STREET, #C MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Butler, Belinda Lee 7621 SW 55 Avenue #B Miami, FL 33143 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS MEYERINCH, ROBERTA 5633 GRANADA BLVD CORAL GABLES, FL 33143 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Meyeringh, Roberta 5633 Granada Blvd Coral Gables, FL 33143 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ANDREWS, CAROL 7641 SW 55TH AVENUE, #CC MIAMI, FL 33143 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition AS Andrews, Carol 7641 SW 55 Avenue #C Miami, FL 33143 |

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: DATE 12/29/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR