2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# 736691

Entity Name: MANATEE CONDOMINIUM, INC.

Current Principal Place of Business:

9273 COLLINS AVENUE
SURFSIDE, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

9273 COLLINS AVENUE
SURFSIDE, FL 33154 US

New Mailing Address:

FEI Number: 59-1684713 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROGEL, DAVID H ESQ
121 ALHAMBRA PLAZA
10TH FLOOR
CORAL GABLES, FL 33134 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: V (X) Delete
Name: COTELESSO, VITO
Address: 9273 COLLINS AVE., #503
City-St-Zip: SURFSIDE, FL 33154 US

Title: P ( ) Delete
Name: KUND, SEAN
Address: 9273 COLLINS AVE., #312
City-St-Zip: SURFSIDE, FL 33154 US

Title: T ( ) Delete
Name: FERNANDEZ, MERCEDES
Address: 9273 COLLINS AVE., #311
City-St-Zip: SURFSIDE, FL 33154 US

Title: D ( ) Delete
Name: KIRSCHNER, IRA
Address: 9273 COLLINS AVE., #907
City-St-Zip: SURFSIDE, FL 33154 US

Title: D ( ) Delete
Name: VAZQUEZ, JOSE
Address: 9273 COLLINS AVE. #609
City-St-Zip: SURFSIDE, FL 33154 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: MERCEDES FERNANDEZ T 05/01/2009
Electronic Signature of Signing Officer or Director — Date