

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90022 030 ****61.25



| | | | |
|---|--|---|---------|
| DOCUMENT # 736786 1. Entity Name THE 3862 CONDOMINIUM, INC. | | | |
| Principal Place of Business 3862 NE 171 ST. 4 N. MIAMI FL 33160 | Mailing Address 3862 NE 171 ST. 4 N. MIAMI FL 33160 | | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | City & State | | |
| Zip | Country | Zip | Country |
| 6. Name and Address of Current Registered Agent DONAHUE, JOHN G 3862 NE 171 ST., #B #4 N. MIAMI BEACH FL 33160 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City | |
| 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. | | 4. FEI Number 59-2365390 | |
| SIGNATURE: <i>John S. Donahue</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | DATE: <i>2/8/07</i> <small>DATE</small> | |



1st MOORE CR2E037 (10/06)

| | | |
|--|--|------------------------------------|
| FILE NOW: FEE IS \$61.25 Due By May 1, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$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 | PD | TITLE | PD |
| NAME | DONAHUE, JOHN G | NAME | <i>Donahue, John G. #4</i> |
| STREET ADDRESS | 3862 NE 171ST STREET #4 | STREET ADDRESS | <i>3862 NE 171 STREET #4</i> |
| CITY-ST-ZIP | N MIAMI BEACH FL | CITY-ST-ZIP | <i>N. MIAMI BEACH, FL</i> |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE | SD | TITLE | SD |
| NAME | RICING, SUNNY | NAME | <i>CRUZ, BENNY</i> |
| STREET ADDRESS | 3862 NE 171ST STREET | STREET ADDRESS | <i>3862 NE 171 STREET #6</i> |
| CITY-ST-ZIP | N MIAMI BEACH FL | CITY-ST-ZIP | <i>N. MIAMI BEACH, FL</i> |
| | <input type="checkbox"/> Delete | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | VTD | TITLE | VTD |
| NAME | RILING, ROBERT | NAME | <i>FORMOSO, RAY</i> |
| STREET ADDRESS | 3862 NE 171 ST | STREET ADDRESS | <i>3862 NE 171 STREET #5</i> |
| CITY-ST-ZIP | N MIAMI BEACH FL | CITY-ST-ZIP | <i>N MIAMI BEACH, FL</i> |
| | <input type="checkbox"/> Delete | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *John S. Donahue* *2/8/07*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #