

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737537

FILED
Mar 24, 2009
Secretary of State

Entity Name: SCOTTY CONDO, INC.

Current Principal Place of Business:

500 NE SPANISH RIVER BLVD
SUITE 18
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

C/O BEACON PROPERTY MANAGEMENT
500 NE SPANISH RIVER BLVD., SUITE 18
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-2418264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIS, ERNEST: BEACON PROPERTY MGMT., INC
500 NE SPANISH RIVER BLVD
SUITE 18
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

WILLIS, ERNEST
500 NE SPANISH RIVER BLVD
SUITE 18
BOCA RATON, FL 33431 US

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: ERNEST WILLIS

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GIOVANNI, CORTEZ
Address: 5122 WOODFIELD WAY
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: TD () Delete
Name: MIKO, LLOU
Address: 12111 CLASSIC DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: SD (X) Delete
Name: RAMIREZ, ELVIRA
Address: 7837 NW 62 TERR
City-St-Zip: PARKLAND, FL 33067 US

Title: VPD (X) Delete
Name: MIRANDA, DANIEL
Address: 14801 SW 33 STREET
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: LIQU, MIKO
Address: 12111 CLASSIC DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: D (X) Change () Addition
Name: MCKENZIE, JOHN
Address: 500 NE SPANISH RIVER BLVD #18
City-St-Zip: BOCA RATON, FL 33431

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: MIKO LIQU

PTSD

03/24/2009

Electronic Signature of Signing Officer or Director

Date