2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State
02-12-2004 90027 029 ****61.25

DOCUMENT # 738863

1. Entity Name

ABITARE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3495 MAIN HIGHWAY COCONUT GROVE FL 33133	10465 SW 42 TERRACE MIAMI FL 33165

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2023220 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COONEY, JOHN
3190 VIA ABITARE
MIAMI FL 33133

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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	VPD COHEN, HARVEY 3196 VIA ABITARE MIAMI FL 33133	☑ Delete	VPD BARBARA LANGE 3198 VIA ABITARE MIAMI FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAMBOA, ANDREA 3169 VIR ABITARE MIAMI FL 33133	☑ Delete	D LYNN LATHAM 3187 VIA ABITARE MIAMI FL 33133	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD COONEY, JOHN 3190 VIA ABITARE MIAMI FL 33133	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROBINSON, HAL 3163 VIA ABITARE MIAMI FL 33133	☑ Delete	SD MICHAEL D ROBINSON 3179 VIA ABITARE MIAMI FL 33133	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREENFIELD, PRISCILLA 3194 VIA ABITARE MIAMI FL 33133	☐ Delete	D SANTIAGO SOTO 3171 VIA ABITARE MIAMI FL 33133	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STEPHENSON, LAURA 3177 VIA ABITARE MIAMI FL 33133	☑ Delete	PD STEVE MASSEY 3185 VIA ABITARE MIAMI FL 33133	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 W. Cooney John W. Cooney 2-9-04 3056731313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #