2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2008
Secretary of State

DOCUMENT# 738863

Entity Name: ABITARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3495 MAIN HIGHWAY
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

10691 N. KENDALL DRIVE
SUITE 312
MIAMI, FL 33176

New Mailing Address:

FEI Number: 59-2023220 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MYERS, KENNETH M
3192 VIA ABITARE
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

STEPHENSON, LAURA P
3177 VIA ABITARE
MIAMI, FL 33133 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: LAURA P. STEPHENSON 04/26/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GREENFIELD, PRICILLA
Address: 3194 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: TD ( ) Delete
Name: COONEY, JOHN W
Address: 3190 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: SD ( ) Delete
Name: STEPHENSON, LAURA P
Address: 3177 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: VP/D ( ) Delete
Name: MYERS, KENNETH M
Address: 3192 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: S/D ( ) Delete
Name: HASSINE, CATHY
Address: 3179 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: D (X) Delete
Name: COHEN, HARVEY
Address: 3167 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GREENFIELD, PRISCILLA
Address: 3194 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

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

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

Title: VP/D (X) Change ( ) Addition
Name: ROBINSON, HAROLD
Address: 3163 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change ( ) Addition
Name: JIMENEZ, JULIO
Address: 3171 VIA ABITARE
City-St-Zip: MIAMI, FL 33133

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: LAURA P. STEPHENSON S/D 04/26/2008
Electronic Signature of Signing Officer or Director Date