## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#749961** 

FILED Mar 21, 2005 Secretary of State

Entity Name: KING RICHARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4141 COLLINS AVENUE MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

4141 COLLINS AVENUE MIAMI BEACH, FL 33140

FEI Number: 59-2138642 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERNARDO, SARUSKI LIPSKAR, JOSEPH 4141 COLLINS AVE. 3100 COLLINS AVE

MIAMI BCH, FL 33140 US MIAMI BCH, FL 33140 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: JOSEPH LIPSKAR 03/21/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DT ( ) Delete Title: PR (X) Change ( ) Addition

Name: BERNARDO, SARUSKI, Name: URQUIZA, ELSA
Address: 4141 COLLINS AVENUE Address: 4141 COLLINS AVENUE

City-St-Zip: MIAMI BEACH, FL City-St-Zip: MIAMI BEACH, FL

Address: 4141 COLLINS AVE Address: 4141 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL City-St-Zip: MIAMI BEACH, FL

Title: VPD ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 MUNOZ, ARMANDO
 Name:
 WOLF, DREW

 Address:
 4141 COLLINS AVE
 Address:
 4141 COLLINS AVE

 City-St-Zip:
 MIAMI BEACH, FL
 City-St-Zip:
 MIAMI BEACH, FL

 Name:
 FRANCISCO, MAS
 Name:
 LUSKY, JEFFREY

 Address:
 4141 COLLINS AVE
 Address:
 4141 COLLINS AVE

 City-St-Zip:
 MIAMI BEACH, FL
 City-St-Zip:
 MIAMI BEACH, FL

 Name:
 Name:
 ROBBINS, MARIA

 Address:
 Address:
 4141 COLLINS AVE

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WOLF DREW VP 03/21/2005