2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007
Secretary of State

DOCUMENT# 753247

Entity Name: 4122 COLLINS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4122 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4122 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-2153680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

4122 COLLINS CONDOMINIUM ASSOC.
4122 COLLINS AVE
MIAMI, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LISETTE, LORENZO
Address: 4122 COLLINS AVE 4A
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD ( ) Delete
Name: CALDERON, IRMA
Address: 4122 COLLINS AVE 2A
City-St-Zip: MIAMI BEACH, FL 33140

Title: SECD ( ) Delete
Name: CALDERON, DINO
Address: 4122 COLLINS AVE 5B
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD ( ) Delete
Name: MATHER, AMY
Address: 4122 COLLINS AVE 6-A
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: BREAUX, MIKE
Address: 4122 COLLINS AVE 2A
City-St-Zip: MIAMI BEACH, FL 33140

Title: SECD (X) Change ( ) Addition
Name: RABINOVITZ, SHARON
Address: 4122 COLLINS AVE 5B
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD (X) Change ( ) Addition
Name: MATHER, AMY
Address: 4122 COLLINS AVE 6A
City-St-Zip: MIAMI BEACH, FL 33140

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: AMY MATHER TD 05/03/2007

Electronic Signature of Signing Officer or Director — Date