2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# 756425

Entity Name: TAMIAMI AIRPORT WAREHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13901 SW 140 STREET
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13901 SW 140 STREET
MIAMI, FL 33186

New Mailing Address:

FEI Number: 59-2511153 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMS, LINDA C
13901 SW 140 STREET
MIAMI, FL 33186 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:	VD	( ) Delete
Name:	STEINBRING, STEVE	
Address:	13953 SW 140 ST.	
City-St-Zip:	MIAMI, FL 33186	
Title:	ST	( ) Delete
Name:	SIMS, LINDA C	
Address:	13901 S W 140 STREET	
City-St-Zip:	MIAMI, FL 33186	
Title:	D	( ) Delete
Name:	DONNELLY, DAVE	
Address:	13973 SW 140 ST	
City-St-Zip:	MIAMI, FL 33186	
Title:	D	( ) Delete
Name:	SIMS, MILTON	
Address:	13965 SW 140 STREET	
City-St-Zip:	MIAMI, FL 33136	
Title:	PD	( ) Delete
Name:	KOLOMYSKI, WALTER	
Address:	13959 S. W. 140TH ST.	
City-St-Zip:	MIAMI, FL 33186	
Title:	D	( ) Delete
Name:	OSTLUND, HOWARD	
Address:	13953 SW 140 STREET	
City-St-Zip:	MIAMI, FL 33186	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: LINDA C. SIMS ST 04/16/2009

Electronic Signature of Signing Officer or Director — Date