

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758320

FILED
Feb 15, 2010
Secretary of State

Entity Name: GABLES PARK TOWER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13250 SW 135 AVENUE
MIAMI, FL 33186 US

New Principal Place of Business:

C/O COURTESY PROPERTY MANAGEMENT
13250 SW 135 AVENUE
MIAMI, FL 33186 US

Current Mailing Address:

13250 SW 135 AVENUE
MIAMI, FL 33186 US

New Mailing Address:

C/O COURTESY PROPERTY MANAGEMENT
13250 SW 135 AVENUE
MIAMI, FL 33186 US

FEI Number: 59-2123957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
121 ALHAMBRA PLAZA
10TH FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

STEVE J. LACHTERMAN, P. A.
2655 LEJEUNE RD.,
SUITE 1-D
CORAL GABLES, FL 33134 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: STEVE J. LACHTERMAN

02/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: ADAMES, HERMAN MR
Address: 911 EAST PONCE DE LEON BLVD #503
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VPD
Name: FONGON, ROLANDO MR
Address: 911 E PONCE DE LEON BLVD., #901
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SD
Name: EGURROLA, DEBORAH MS
Address: 911 E PONCE DE LEON BLVD., #1002
City-St-Zip: CORAL GABLES, FL 33134 US

Title: PD
Name: PAJON, LEAH MS
Address: 911 E PONCE DE LEON BLVD., # 803
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D
Name: SWANSON, ELAINE MS
Address: 911 PONCE DE LEON BLVD., # 1201
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: LEAH PAJON

PD

02/15/2010

Electronic Signature of Signing Officer or Director

Date