


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 26, 2005 08:00 A**  
**Secretary of State**

**DOCUMENT # 763366**  
 1. Entity Name  
**MARBELLA CONDOMINIUM NO. 207 ASSOCIATION, INC.**



Principal Place of Business      Mailing Address  
 C/O ARCHDIOCESE OF MIAMI      C/O ARCHDIOCESE OF MIAMI  
 9401 BISCAYNE BLVD              9401 BISCAYNE BLVD  
 MIAMI SHORES, FL 33138        MIAMI SHORES, FL 33138

**DO NOT WRITE IN THIS SPACE**



01102005 No Chg-NP      CR2E037 (10/03)

4. FEI Number      Applied For  
**65-0038181**      Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 FITZGERALD, J PATRICK  
 110 MERRICK WAY  
 CORAL GABLES, FL 33134

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)      DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	HENNESSEY, WILLIAM
STREET ADDRESS	9401 BISCAYNE BOULEVARD
CITY, ST, ZIP	MIAMI SHORES, FL
TITLE	PD
NAME	VAUGHAN, JOHN J
STREET ADDRESS	9401 BISCAYNE BLVD
CITY, ST, ZIP	MIAMI SHORES, FL 00000,
TITLE	VD
NAME	SOUCKAR, MICHAEL
STREET ADDRESS	9401 BISCAYNE BLVD
CITY, ST, ZIP	MIAMI, FL 33138
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

UN00000197390  
 01/27/05-80010-002 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: John J. Vaughan      John J. Vaughan      1/20/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #