


**FILED**  
Feb 20, 2006 08:00 AM  
Secretary of State

|  |   |  |   |
|--|---|--|---|
| <b>DOCUMENT # A14898</b>   |   | <b>Feb-20, 2006 08:00 AM</b><br><b>Secretary of State</b>  |   |
| 1. Entity Name<br><b>THE FLORIDIAN CLUB CONDOMINIUM, LTD.</b>  |   |   |   |
| Principal Place of Business<br><b>3250 MARY STREET, SUITE 306<br/>MIAMI FL 33133</b>   |   | Mailing Address<br><b>3250 MARY STREET, SUITE 306<br/>MIAMI FL 33133</b>   |   |
| 2. Principal Place of Business<br><br>Suite, Apt. #, etc.  |   | 3. Mailing Address<br><br>Suite, Apt. #, etc.  |   |
| City & State   |   | City & State   |   |
| Zip  | Country   | Zip  | Country                                   |
| 4. FEI Number<br><b>59-2414109</b>   |   | Applied For<br>Not Applicable  |   |
| 5. Certificate of Status Desired <input type="checkbox"/>  |   | <b>\$8.75 Additional Fee Required</b>  |   |
| 6. Name and Address of Current Registered Agent<br><br><b>LEVINE, ALAN W ESQUIRE<br/>1110 BRICKELL AVENUE, 7TH FLOOR<br/>MIAMI FL 33131</b>  |   | 7. Name and Address of New Registered Agent<br><br>Name _____<br>Street Address (P.O. Box Number is Not Acceptable) _____<br>City _____ <b>FL</b> Zip Code _____ |   |
| 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 _____  |   | DATE _____   |   |
| <b>FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State,</b>  |   |  |   |
| <b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b><br><b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>  |   |  |   |
| 12. GENERAL PARTNER INFORMATION  |   | 13. ADDRESS CHANGES ONLY   |   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | P95000044604<br>MID-FLORIDA MANAGEMENT CORPORATION<br>3250 MARY STREET, SUITE 306<br>MIAMI FL 33133 | STREET ADDRESS<br><br>CITY-ST-ZIP  |   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | STREET ADDRESS<br><br>CITY-ST-ZIP  | UNREGISTERED<br>02/28/06-80025-003 158.75 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | STREET ADDRESS<br><br>CITY-ST-ZIP  | UNREGISTERED<br>03/02/06-80025-003 500.00 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | STREET ADDRESS<br><br>CITY-ST-ZIP  |   |
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| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | STREET ADDRESS<br><br>CITY-ST-ZIP  |   |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes |   |  |   |
| SIGNATURE: _____   |   |  |   |