

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 17, 2009  
Secretary of State**

DOCUMENT# N01000001163

Entity Name: MASADA CONDOMINIUM ASSOCIATION INC.

**Current Principal Place of Business:**

3901 INDIAN CREEK DR, BOX 518  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

3901 INDIAN CREEK DR, BOX 518  
MIAMI BEACH, FL 33140

**New Mailing Address:**

FEI Number: 65-0349429      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERGER, WILLIAM  
3901 INDIAN CREEK DR, #308  
MIAMI BEACH, 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: P ( ) Delete  
Name: BERGER, WILLIAM  
Address: 3901 INDIAN CREEK DR, #308  
City-St-Zip: MIAMI BEACH, FL 33140

Title: V ( ) Delete  
Name: KAMINER, EUGENE  
Address: 3901 INDIAN CREEK DR, #408  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete  
Name: KALISCH, JACOB  
Address: 3901 INDIAN CREEK DR, #305  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: LIEBER, LEO  
Address: 3901 INDIAN CREEK DR, #403  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Delete  
Name: MEDINA, TERESA  
Address: 3901 INDIAN CREEK DR, #506  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: KLEIN, IRENE  
Address: 3901 INDIAN CREEK DR, #207  
City-St-Zip: MIAMI BEACH, FL 33140

**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: WILLIAM BERGER

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date