

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002560

FILED
Apr 30, 2009
Secretary of State

Entity Name: FLAGLER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

17 EAST FLAGLER ST.
SUITE 219
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

17 EAST FLAGLER ST.
SUITE 219
MIAMI, FL 33131

New Mailing Address:

FEI Number: 45-0474182 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOMEZ, ELIZABETH
17 EAST FLAGLER STREET
SUITE 219
MIAMI, FL 33131 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: DP () Delete
Name: SHERMAN, JEFF
Address: P O BOX 13351
City-St-Zip: MIAMI, FL 33101

Title: DV () Delete
Name: AMINOV, ABRAM
Address: 55 NE 1ST ST., #12
City-St-Zip: MIAMI, FL 33132

Title: DT () Delete
Name: GOMEZ, ELIZABETH
Address: 2 NE 1 STREET
City-St-Zip: MIAMI, FL 33132

Title: DS () Delete
Name: AMINOV, GEORGE
Address: 55 NE 1ST ST., #12
City-St-Zip: MIAMI, FL 33132

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:

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: ELIZABETH GOMEZ

MNGR

04/30/2009

Electronic Signature of Signing Officer or Director

Date