

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003768

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** LINCOLN PLACE RESIDENCES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1610 LENOX AVE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

BLUE SKY MIAMI  
1680 MICHIGAN AVENUE, STE 908  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 65-1108100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEINER, RM  
1680 MICHIGAN AVE, STE 908  
MIAMI BEACH, FL 33139 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: D  
Name: DESORBO, DAVID  
Address: 1610 LENOX AVE, APT 507  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: DINICOLA, DANIEL  
Address: 1610 LENOX AVE, APT 515  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: YEAMAN, ALLAN  
Address: 1610 LENOX AVE, APT 208  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR  
Name: SHEINER, ROBERT MAXWELL  
Address: 1680 MICHIGAN AVE, STE 908  
City-St-Zip: MIAMI BEACH, FL 33139

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: R M SHEINER

MGR

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date