

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

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N01000006110 1. Entity Name SPEAR AT AQUA CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139	Mailing Address 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
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01252005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-1157311	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LEWIS, HAROLD L ESQ ONE BISCAYNE TOWER, STE. 2400 2 S. BISCAYNE BLVD. MIAMI, FL 33131	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

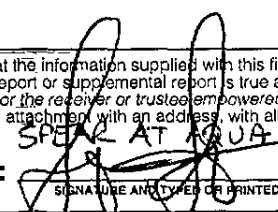
Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ROBINS, CRAIG 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GRETENSTEIN, STEVE 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARON, ROSS 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/21/05-80100-020 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)(f), 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:  **SPEAR AT AQUA Condominium Association, INC.**
Vice President 4/18/05 (305) 531-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #