2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001392

Entity Name: VILLA GATSBY CONDOMINIUM ASSOCIATION, INC.

FILED Jul 25, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

928 EUCLID AVENUE MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

928 EUCLID AVENUE #9 MIAMI BEACH, FL 33139

FEI Number: 61-1423362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHERMAN, THOMAS G 218 ALMERIA AVENUE CORAL GABLES, FL 33134 US

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.

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SIGNATURE:

Name:

Address:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

928 EUCLID AVENUE #5

ANGELA, NIELSON

 Title:
 PD () Delete

 Name:
 HARARI, PHILIPPE

 Address:
 18671 COLLINS AVENUE, #1601

 City-St-Zip:
 SUNNY ISLES, FL 33139

 City-St-Zip:
 SUNNY ISLES, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

 Title:
 VPD () Delete
 Title:
 STD (X) Change () Addition

 Name:
 HARARI, LAURENT
 Name:
 ANDREW, KWIAT

 Address:
 18671 COLLINS AVENUE, #1601
 Address:
 928 EUCLID AVENUE #6

 City-St-Zip:
 SUNNY ISLES, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: STD (X) Delete Title: () Change () Addition

 Name:
 BENITAH, HARRY
 Name:

 Address:
 735 5TH STREET
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW KWIAT STD 07/25/2004