

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N02000004296

Entity Name: MASHTA ISLAND ASSOCIATION, INC.

Current Principal Place of Business:

471 NORTH MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

471 NORTH MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 26-6946517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAGUE, BRIAN P
640 NORTH MASHTA DRIVE
KEY BISCAYNE, FL 33149 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: ROTHFELDT, MARC
Address: 481 SOUTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: V () Delete
Name: HERNANDEZ-DESSAUER, ALEX
Address: 540 WEST MASHATA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T () Delete
Name: ORTEGA, EILEEN
Address: 621 SOUTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: S () Delete
Name: FORMOSA-MURIAS, MARIKA
Address: 471 NORTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: ALFONSO, MOLLY
Address: 711 SOUTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: POWELL, KAREN
Address: 560 NORTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FORMOSO, MARIKA G
Address: 471 NORTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: V (X) Change () Addition
Name: TAGUE, MARY
Address: 610 NORTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: LEME, CLAUDIA B
Address: 650 NORTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PUYANIC, MAX D
Address: 480 SOUTH MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

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: MARIKA G. FORMOSO

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date