2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 15, 2007 8:00 am **Secretary of State** DOCUMENT # N02000004432 02-15-2007 90043 031 ****61.25 CENTRUM PLAZA CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address CK#/07 CK DATE /04 MAIL DATE MIAMI MGMT. MIAMI MGMT. 1145 SAWGRASS CORP. PKWY. 1145 SAWGRASS CORP. PKWY. SUNRISE, FL 33323 SUNRISE, FL 33323 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232007 CR2E037 (12/06) Chg-NP City & State City & State 4. FEI Number 41-2050593 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PHILLIPS, EISINGER, & KOSS 45 NW 5 ST. Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33128 City Zip Code 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 title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete ☐ Addition TITLE TITLE MCKEAN, RANDOLPH A NAME NAME rass Corborate 1145 SAWGRASS CORPORATE PKWY STREET ADDRESS STREET ADDRESS SUNRISE, FL 33323 CITY-ST-ZIP CITY-ST-ZIP Delete ■ Addition TITLE TITLE Change BOSEN MARK NAME NAME grass Overforate 1145 SAWGRASS CORPORATE PKWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33323 CITY-ST-7IP VP BRILL BAIL, DAVID TITLE ☐ Delete TITLE ☐ Addition NAME NAME 1145 SAWGRASS CORPORATE PKWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33323 CITY-ST-ZIP Delete Addition TITLE TITLE Change BOSEM, MARK MARKE NAME 1145 SAWGRASS CORPORATE PKWY STREET ADDRESS STREET ADDRESS SUNRIS, FL 33323 CITY-ST-ZIP CITY - ST - ZIP TITLE Detete TITLE ☐ Change ■ Addition THOMAS, ERNEST NAME NAME STREET ADDRESS 1145 SAWGRASS CORPORATE PKWY STREET ADDRESS City+ST-7IP FORT LAUDERDALE, FL 33323 CITY-ST-ZIP ☐ Change TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this Hing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplied entail report is fue 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 received or trustee eprodwered 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.

FILED