

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Nov 28, 2005  
Secretary of State**

DOCUMENT# N02000005070

**Entity Name:** SOUTH BEACH HUDSON CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**420 15TH STREET  
MIAMI BEACH, FL 33315**New Principal Place of Business:**420 15TH STREET  
MIAMI BEACH, FL 33139**Current Mailing Address:**518 NE 72 ST.  
MIAMI, FL 33138**New Mailing Address:**P.O. BOX 402336  
MIAMI BEACH, FL 33140

FEI Number: 03-0500580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BENNETT, JOAN  
518 NE 72 ST.  
MIAMI, FL 33138 US**Name and Address of New Registered Agent:**BENNETT, JOAN  
763 41ST STREET  
SUITE C  
MIAMI BEACH, FL 33140 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.

SIGNATURE: JOAN BENNETT

11/28/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: CAMANERI, DIANE  
Address: 420 15 ST #209  
City-St-Zip: MIAMI BEACH, FL 33139Title: SD ( ) Delete  
Name: JACOBS, MINDY  
Address: 420 15 ST. #105  
City-St-Zip: MIAMI BEACH, FL 33139Title: TD ( ) Delete  
Name: HUN, JASON  
Address: 420 15 ST. #111  
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P/D (X) Change ( ) Addition  
Name: CAMMALLERI, DIANE  
Address: 420 15 ST #209  
City-St-Zip: MIAMI BEACH, FL 33139Title: S/D (X) Change ( ) Addition  
Name: BRELAG, BRAD  
Address: 420 15 ST. #202  
City-St-Zip: MIAMI BEACH, FL 33139Title: T/D (X) Change ( ) Addition  
Name: HSUN, JASON  
Address: 420 15 ST. #111  
City-St-Zip: MIAMI BEACH, FL 33139

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: DIANE CAMMALLERI

P/D

11/28/2005

Electronic Signature of Signing Officer or Director

Date