2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006278

FILED Feb 13, 2009 Secretary of State

Entity Name: 1525 PENNSYLVANIA CONDOMINIUM ASSOCIATION, INC.

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

1525 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

PO BOX 841437 PO BOX 191042

PEMBROKE PINES, FL 33084 MIAMI BEACH, FL 33119

FEI Number: 79-3074548 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:

LJ SERVICES GROUP

AMERICAN PROPERTY MANAGEMENT SPECIALISTS

1045 KANE CONCOURSE

1370 WASHINGTON AVENUE

#212 SUITE 312 BAY HARBOR ISLANDS, FL 33154 US MIAMI BEACH, FL 33139 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: KRISTINA MANGOLD 02/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CH/

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 KLEIN, MARK
 Name:

 Address:
 1525 PENNSYLVANIA AVE
 Address:

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

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

 Name:
 SANCHEZ, GENIS
 Name:

 Address:
 1525 PENNSYLVANIA AVE
 Address:

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

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

 Name:
 TAYLOR, LANIER
 Name:

 Address:
 1525 PENNSYLVANIA AVE
 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 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: GENIS SANCHEZ VPD 02/13/2009