## .2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

ED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

SIGNATURE:

## DOCUMENT # N02000006542 FILED COURTS BRICKELL KEY CONDOMINIUM ASSOCIATION, INC 05 JUL 27 PM 1:41 Principal Place of Business Mailing Address 801 BRICKELL KEY BLVD., STE 408 SEURETARY OF STATE 801 BRICKELL KEY BLVD., STE 408 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07062005 Chg-NP CR2E037 (10/03) 4. FEI Number 54-2071714 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SKRLB, INC. Street Address (P.O. Box Number is Not Acceptable) 201 ALHAMBRA CIR. **SUITE 1102** CORAL GABLES, FL 33134 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 agont and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61,25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change Addition HEIN, BENJAMIN NAME 801 BRICKELL KEY BLVD, SUITE 408 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP TITLE Delete X Addition TITLE ☐ Change VD VIOLET RECORD NAME HERNIDA, MARTHA NAME BOL BRICKELL KEY BLVD, SUITE 408 STREET ADDRESS 801 BRICKELL KEY BLVD, SUITE 408 STREET ADDRESS CITY-ST-ZIP MIAM!, FL 33131 CITY-ST-ZIP NIAMI IFL 33131 TITLE STD ☐ Delete TITLE ☐ Change ☐ Addition NAME OLMO, PAMELA NAME 700058303477 STREET ADDRESS 801 BRICKELL KEY BLVD, SUITE 408 STREET ADDRESS 08/05/05--01066--018 \*\*61.25 CITY-ST-ZIP CITY-SI-ZIP MIAMI, FL 33131 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZiP CITY-ST-ZIP □ Delete TITLE TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if