2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 17, 2009 DOCUMENT# N02901 Secretary of State

Entity Name: BLEAU FONTAINE CONDOMINIUM ASSOCIATION NUMBER ONE, INC.

Current Principal Place of Business: New Principal Place of Business: C/O GRS MGMT OF BROWARD 7900 NW 155 STREET SUITE 205 MIAMI LAKES, FL 33016 **New Mailing Address: Current Mailing Address:** 7900 NW 155 STREET MIAMI LAKES, FL 33016 FEI Number: 59-2457712 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: PARISER, BRIAN W GRS MANAGEMENT INC 9130 SOUTH DADELAND BLVD. 7900 NW 155TH STREET DATRAN 11 SUITE 1511 205 MIAMI, FL 33156 US MIAMI LAKES, FL 33016 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: MARIA E. BARRETO 03/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition HUMBERTO, FIGUERAS Name: Name: 7900 NW 155 STREET 205 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: TD () Delete Title: () Change () Addition RIGOA, SERGIO Name: Name: Address: 7900 NW 155TH ST 205 Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition STINFIL, GUSTAVE Name: Name: 7900 NW 155TH STREET 205 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FONT, ORLANDO Name: Address: 7900 NW 155TH STREET 205 Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, CARMEN Name: Name: 7900 NW 155TH STREET 205 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition ROSARIO, FERNANDO Name: Name: Address: 7900 NW 155 STREET 205 Address: MIAMI LAKES, FL 33016 City-St-Zip: 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: FERNANDO ROSARIO **PRES** 03/17/2009