

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001220

FILED  
Jun 12, 2009  
Secretary of State

Entity Name: ABSOLUT CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

245 MICHIGAN AVE  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

245 MICHIGAN AVENUE  
MIAMI BEACH, FL 33139

## Current Mailing Address:

P.O. BOX 402507  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 20-0897179      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

DE LA CAMARA, ROSA M  
121 ALHAMBRA PLAZA 10TH FL  
MIAMI, FL 33134 US

## Name and Address of New Registered Agent:

BAKALAR & ASSOCIATES, P.A.  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FL 33324 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: MICHAEL BAKALAR

06/12/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BUCKWELL, OLIVER  
Address: 245 MICHIGAN AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: MANHIRE, RICHARD  
Address: 245 MICHIGAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: BENZEL, VERONICA  
Address: 245 MICHIGAN AVE  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BUCKWELL, OLIVER  
Address: P.O. BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPT (X) Change ( ) Addition  
Name: MANHIRE, RICHARD  
Address: P.O. BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S (X) Change ( ) Addition  
Name: BENZEL, VERONICA  
Address: P.O. BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

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: OLIVER BUCKWELL

P

06/12/2009

Electronic Signature of Signing Officer or Director

Date