

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002874

FILED  
Feb 20, 2007  
Secretary of State

Entity Name: EASTSIDE AT AVENTURA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10557 N.W. 53 STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

3000 NE 188 STREET  
AVENTURA, FL 33180

**Current Mailing Address:**

10557 N.W. 53 STREET  
SUNRISE, FL 33351

**New Mailing Address:**

C/O DCI  
2035 HARDING STREET, SUITE 200  
HOLLYWOOD, FL 33020

FEI Number: 20-8474778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DADE COUNTY CORPORATE AGENTS, INC.  
20801 BISCAYNE BOULEVARD, SUITE 505  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

MEYROWITZ, ANDREW  
2035 HARDING STREET,  
SUITE 200  
HOLLYWOOD, FL 33020 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: ANDREW MEYROWITZ, DCI

02/20/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: EDELMAN, LEONARD  
Address: 10557 N.W. 53 STREET  
City-St-Zip: SUNRISE, FL 33351

Title: VTD ( ) Delete  
Name: SCHEINHOLZ, ARTHUR  
Address: 10557 N.W. 53 STREET  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: PORT, BRIAN E  
Address: 20801 BISCAYNE BLVD, SUITE 505  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PORT, BRIAN E  
Address: 18901 NE 29TH AVENUE SUITE 100  
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTHUR SCHEINHOLZ

VTD

02/20/2007

Electronic Signature of Signing Officer or Director

Date