

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 28, 2006
Secretary of State**

DOCUMENT# N03000003211

Entity Name: BRICKELL OAKS TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**123 SW 17TH RD
#101
MIAMI, FL 33129**New Principal Place of Business:****Current Mailing Address:**123 SW 17TH RD
#101
MIAMI, FL 33129**New Mailing Address:**

FEI Number: 42-1597621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:ASCARI, NICOLETTA
123 SW 17TH RD #113
MIAMI, FL 33129 US**Name and Address of New Registered Agent:**HALEY-STATSNY, GABRIELA
123 SW 17TH RD #109
MIAMI, FL 33129 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: TODD SCHAAN

06/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: ASCARI, NICOLETTA
Address: 123 SW 17 RD #113
City-St-Zip: MIAMI, FL 33129Title: VP () Delete
Name: DANGOND, VICTOR
Address: 123 SW 17TH RD
City-St-Zip: MIAMI, FL 33129Title: T () Delete
Name: SCHAAN, TODD
Address: 123 SW 17TH RD
City-St-Zip: MIAMI, FL 33129Title: S () Delete
Name: BEAM, LYNN
Address: 123 SW 17 RD #106
City-St-Zip: MIAMI, FL 33129Title: D () Delete
Name: HORTON, MARK
Address: 123 SW 17 RD #112
City-St-Zip: MIAMI, FL 33129Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: ASCARI, NICOLETTA
Address: 123 SW 17 RD #113
City-St-Zip: MIAMI, FL 33129Title: VD (X) Change () Addition
Name: DANGOND, VICTOR
Address: 123 SW 17TH RD
City-St-Zip: MIAMI, FL 33129Title: TD (X) Change () Addition
Name: SCHAAN, TODD
Address: 123 SW 17TH RD
City-St-Zip: MIAMI, FL 33129Title: SD (X) Change () Addition
Name: BEAM, LYNN
Address: 123 SW 17 RD #106
City-St-Zip: MIAMI, FL 33129Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: PD () Change (X) Addition
Name: HALEY-STATSNY, GABRIELA
Address: 123 SW 17 RD #109
City-St-Zip: MIAMI, FL 33129

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: TODD SCHAAN

T

06/28/2006

Electronic Signature of Signing Officer or Director

Date