2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N03000003367

Entity Name: BAY HARBOUR OF ISLAMORADA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

101 GULFVIEW DR.
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

C/O 7805 S.W. 6TH COURT
PLANTATION, FL 33324

New Mailing Address:

74 N. BOUNTY LN.
KEY LARGO ,, FL 33037

FEI Number: 05-0666009 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVERMAN, MARC A ESQ
7805 SW 6TH CT
FRANK WEINBERG, BLACK, P.L.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: ONNEN, TIM
Address: 101 GULFVIEW DR 306
City-St-Zip: ISLAMORADA, FL 33036

Title: S ( ) Delete
Name: GROLMAN, DAVID
Address: 101 GULFVIEW DR 204
City-St-Zip: ISLAMORADA, FL 33036

Title: P ( ) Delete
Name: SALERNO, GEORGE
Address: 101 GULFVIEW DRIVE, UNIT 107
City-St-Zip: ISLAMORADA, FL 33036

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: PHILLIP, NETOLICKY
Address: 101 GULFVIEW DR. APT. 108B
City-St-Zip: ISLAMORADA, FL 33036

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

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

Title: VP ( ) Change (X) Addition
Name: EDWARD, SECK
Address: 101 GULFVIEW DR 209C
City-St-Zip: ISLAMORADA, FL 33036

Title: DIRE ( ) Change (X) Addition
Name: BOBBIE, BRACKEL
Address: 101 GULFVIEW DR 106 B
City-St-Zip: ISLAMORADA, FL 33036

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: GEORGE SALERNO PRES 01/12/2009

Electronic Signature of Signing Officer or Director — Date