
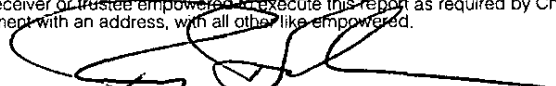


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90028 050 ****61.25

DOCUMENT # N03000004948 <small>1. Entity Name</small> SAINT MARKS CONDOMINIUM ASSOCIATION, INC.																																																																																																																	
<small>Principal Place of Business</small> 1545 NE 123RD ST N MIAMI FL 33161		<small>Mailing Address</small> 1545 NE 123RD ST N MIAMI FL 33161																																																																																																															
<small>2. Principal Place of Business</small> Suite, Apt. #, etc. City & State Zip Country		<small>3. Mailing Address</small> Suite, Apt. #, etc. City & State Zip Country																																																																																																															
<small>4. FEI Number</small>		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																																																																																															
<small>5. Certificate of Status Desired</small> <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																															
<small>6. Name and Address of Current Registered Agent</small> BARKER, ROY 1545 NE 123RD ST N MIAMI FL 33161			<small>7. Name and Address of New Registered Agent</small> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																														
<small>8. 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. I am familiar with, and accept the obligations of registered agent.</small> SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																	
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		<small>9. Election Campaign Financing Trust Fund Contribution.</small> <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																													
Make Check Payable to Florida Department of State																																																																																																																	
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<small>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</small>																																																																																																																	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> SIGNATURE:  </div> <div style="width: 35%; text-align: right;"> 4/13/04 <small>Date</small> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></div> <div style="width: 35%; text-align: right;"><small>Daytime Phone #</small></div> </div>																																																																																																																	

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MOORE CR2E037 (11/03)