2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N03000005019

Entity Name: POINT ROYALE CONDOMINIUM ASSOCIATION NO 1 INC

Current Principal Place of Business:

19380 SW 103 CT
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 570669
MIAMI, FL 33257-066

New Mailing Address:

FEI Number: 41-2093173 **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:

TEGZES, FRANCINE E
8925 SW 148 STREET
200
MIAMI, FL 33176 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: D ( ) Delete
Name: VILLAMIL, ALBERTO
Address: 19380 SW 103 CT
City-St-Zip: MIAMI, FL 33157

Title: V ( ) Delete
Name: SANCHEZ, JAIME
Address: 7761 SW 177 ST
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: FLINK, EMMA
Address: 19376 SW 103 CT
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: TEGZES, FRANCINE
Address: P.O.BOX 570669
City-St-Zip: MIAMI, FL 332570669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: FRANCINE E TEGZES D 05/01/2006

Electronic Signature of Signing Officer or Director — Date