


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2006 8:00 am**  
**Secretary of State**

04-12-2006 90079 012 \*\*\*\*61.25

**DOCUMENT # N03000006309**

1. Entity Name  
**THE FLATS AT MORNINGSIDE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**5701-5781 BISCAYNE BOULEVARD MIAMI, FL 33137**

Mailing Address  
**C/O BERENFELD, SPRITZER, SHECHTER & SHEEP 9655 SOUTH DIXIE HIGHWAY, THIRD FLOOR MIAMI, FL 33156**

40046989



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip

3. Mailing Address  
**90 BSSS - Condo Dept**  
 Suite, Apt. #, etc.  
**2525 Ponce De Leon Blvd**  
 City & State  
**FLS, CORAL GABLES, FL**  
 Zip  
**33134**  
 Country  
**USA**

02032006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**56-2379927**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CRONIG, STEVEN C**  
**307CONTINENTAL PLAZA**  
**3250 MARY STREET**  
**COCONUT GROVE, FL 33133**

7. Name and Address of New Registered Agent  
 Name  
**BECKER & POLIACKOFF PA**  
 Street Address (P.O. Box Number is Not Acceptable)  
**121 Alhambra Plaza**  
**10 FLOOR**  
 City  
**Coral Gables** FL Zip Code  
**33134**

8. The above named \_\_\_\_\_, its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of \_\_\_\_\_

SIGNATURE:  **DAVID FOGEL** 3-16-06  
 DATE

NOTE: Registered Agent signature required when reinstating

Filing Fee is **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

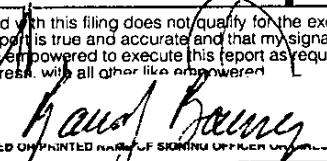
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FREEMAN, GREGORY 1521 ALTON ROAD #533 MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MOYA, ADRIANA 1521 ALTON ROAD #533 MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENBERTO, PADILLA 5781 BISCAYNE BLVD #704 MIAMI, FL 33138	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGORY Freeman 1521 ALTON Road # 533 MIAMI Beach, FL 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>PD RAFFY BALLELLA 5701 Biscayne Blvd #302 MIAMI, FL 33137</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TP Randy Barney 777 ARTHUR Godfrey Road, Ste 320 MIAMI Beach, FL 33140	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Nadina Popper 5701 Biscayne Blvd. #502 MIAMI, FL 33137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FRANTZ Tassy 5701 Biscayne Blvd. #402 MIAMI, FL 33137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE:  **RANDY BARNEY** 4-8-06 786-426-0721  
 DATE DAYTIME PHONE #