2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006523

FILED Apr 13, 2004 Secretary of State

Entity Name: ELIZABETH GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3051 ELIZABETH STREET
MIAMI, FL 33133

3051 ELIZABETH STREET
MIAMI, FL 33133

US

Current Mailing Address: New Mailing Address:

3051 ELIZABETH STREET
MIAMI, FL 33133
3051 ELIZABETH STREET
MIAMI, FL 33133
US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CUMMINS, JEFFREY D 9555 N KENDALL DRIVE SUITE 202 MIAMI, FL 33176

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 GUERRA, MARTIN
 Name:
 SCHWAB, ERIC

 Address:
 9370 SUNSET DR #A-202
 Address:
 3130 DAY AVE

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33133

Title: VD () Delete Title: VSD (X) Change () Addition Name: GUERRA, JUDITH Name: DREW, KATHERINE

 Address:
 9370 SUNSET DR #A-202
 Address:
 3051 ELIZABETH ST

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 MIAMI, FL
 33133

Title: SD () Delete Title: T (X) Change () Addition Name: CUMMINS, PATRICIA Name: MCCOWEN, LYNN

 Name:
 COMMINS, PATRICIA
 Name:
 MCCOWEN, LYNI

 Address:
 9555 N KENDALL DR #202
 Address:
 3130 DAY AVE

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 MIAMI, FL 33133

 Title:
 TD
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 CUMMINS, JEFFREY D
 Name:
 DANIELS, MARSHALL

 Address:
 9555 N KENDALL DR #202
 Address:
 3121 COMMODORE PLAZA

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHERINE DREW VSD 04/13/2004