

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03420

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: 909 CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

909 N MIAMI BEACH BLVD  
N MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALFRED J KATZIN  
7901 SW 6TH COURT STE 140  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 59-2420614      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PORTER, WAYNE R  
909 N MIAMI BEACH BLVD  
SUITE 403  
N MIAMI BEACH, FL 33162 US

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

HOFFMAN, LARIN & AGNETTI  
909 N MIAMI BEACH BLVD  
SUITE 201  
N MIAMI BEACH, FL 33162 US

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: JOHN AGNETTI

02/19/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP/D ( ) Delete  
Name: PORTER, WAYNE,  
Address: 909 N MIAMI BCH BLVD.  
City-St-Zip: N MIAMI BCH, FL

Title: P/D ( ) Delete  
Name: AGNETTI, JOHN  
Address: 909 N MIAMI BEACH BLVD, STE 201  
City-St-Zip: N MIAMI BCH, FL 33162

Title: SD (X) Delete  
Name: MOSKOWITZ, JEROME  
Address: 909 N MIAMI BEACH BLVD  
City-St-Zip: N MIAMI BCH, FL 33162

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: AGNETTI, JOHN  
Address: 909 N MIAMI BCH BLVD. - STE 201  
City-St-Zip: N MIAMI BCH, FL 33162

Title: S/D (X) Change ( ) Addition  
Name: MOSKOWITZ, JEROME  
Address: 909 N MIAMI BEACH BLVD - STE 302  
City-St-Zip: N MIAMI BCH, FL 33162

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

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: JOHN AGNETTI

P/D

02/19/2009

Electronic Signature of Signing Officer or Director

Date