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: New Principal Place of Business:

909 N MIAMI BEACH BLVD N MIAMI BEACH, FL 33162

Current Mailing Address: New Mailing Address:

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

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

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

PORTER, WAYNE R HOFFMAN, LARIN & AGNETTI 909 N MIAMI BEACH BLVD 909 N MIÁMI BEACH BLVD SUITE 403 SUITE 201 N MIAMI BEACH, FL 33162 US 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VP/D () Delete (X) Change () Addition PORTER, WAYNE, AGNETTI, JOHN Name: Name: Address: 909 N MIAMI BCH BLVD. Address: 909 N MIAMI BCH BLVD. - STE 201

City-St-Zip: N MIAMI BCH, FL City-St-Zip: N MIAMI BCH, FL 33162

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

Name: AGNETTI, JOHN Name: MOSKOWITZ, JEROME

Address: 909 N MIAMI BEACH BLVD, STE 201 Address: 909 N MIAMI BEACH BLVD - STE 302 City-St-Zip: N MIAMI BCH, FL 33162

N MIAMI BCH, FL 33162 City-St-Zip:

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

MOSKOWITZ, JEROME Name: Name: Address: 909 N MIAMI BEACH BLVD Address: City-St-Zip: N MIAMI BCH, FL 33162 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