2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N04000000515

Entity Name: THE LOFTS AT BYRON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

501-503-505 74TH STREET
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

C/O COMPLETE PROPERTY MGMT.
P.O. BOX 402507
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 90-0141421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMPLETE PROPERTY MANAGEMENT RESOURCES, IN
3550 BISCAYNE BLVD.
SUITE 401
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

BARCLAY'S COMPLETE PROPERTY MANAGEMENT
555 NE 15TH STREET
SUITE 200
MIAMI, FL 33132 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: RAY HICKS 04/23/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WASHINGTON, DEIDRE
Address: 501 74 STREET #A7
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VP (X) Delete
Name: BATISTA, RAUL
Address: 1595 NORMANDY DRIVE
City-St-Zip: MIAMI BEACH, FL 33141 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WASHINGTON, DEIDRE
Address: P.O. BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140 US

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: RAY HICKS RA 04/23/2009
Electronic Signature of Signing Officer or Director — Date