

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90051 008 ****61.25

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1. Entity Name
MERIDIAN BEACH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1300 COLLINS AVE., STE. 100
MIAMI BEACH, FL 33139**

Mailing Address
**1300 COLLINS AVE., STE. 100
MIAMI BEACH, FL 33139**



01052006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1361817

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SHERMAN, THOMAS G
218 ALMERIA AVE.
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SCHLESSER, MELVYN
1300 COLLINS AVE., STE. 100
MIAMI BEACH, FL 33139**

**PD
BLOOMER, Courtney
1559 Meridian Ave #207
Miami Beach, FL 33139**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
LEEDS, ARTHUR
1300 COLLINS AVE., STE. 100
MIAMI BEACH, FL 33139**

**VD
Covidad, Dario
1559 Meridian Ave #108
Miami Beach, FL 33139**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
GERSHON, ROBERT
1300 COLLINS AVE., STE. 100
MIAMI BEACH, FL 33139**

**STD
Romero, Silvano
1551 Meridian #201
Miami Beach, FL 33139**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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.

Michael J. ... Courtney Bloomer 1/11/06 (305) 674-1791