

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000005449

1. Entity Name
BEVERLY TERRACE MANOR CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
3224 BISCAYNE BLVD.
MIAMI, FL 33137

Mailing Address
3224 BISCAYNE BLVD.
APT. F3
MIAMI, FL 33137

FILED

07 APR 20 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #
SAME AS ABOVE

3. Mailing Address
**3224 BISCAYNE BOULEVARD
UNIT E1**

04052007 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI FL

4. FEI Number
41-2155389

Applied For
Not Applicable

Zip

Country

Zip
33137

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARBIN, EVAN R ESQ.
48 E. FLAGLER ST., PENTH. 104
MIAMI, FL 33131

Name
SAME

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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, and 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

04/24/07--01005--001 **26.25
400095471554
04/03/07--01019--036 **35.00

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **GERMAIN, JOHN A**
STREET ADDRESS **3224 BISCAYNE BLVD, APT. A3**
CITY-ST-ZIP **MIAMI, FL 33137**

TITLE **P** ☒ Change ☒ Addition
NAME **MARIA VICTORIA LOPEZ**
STREET ADDRESS **3224 BISCAYNE BOULEVARD, UNIT C3**
CITY-ST-ZIP **MIAMI FL 33137-4414**

TITLE **VP** ☒ Delete
NAME **PODSTAWSKI, CHRISTOPHER**
STREET ADDRESS **3224 BISCAYNE BLVD, APT. E1**
CITY-ST-ZIP **MIAMI, FL 33137**

TITLE **VP** ☐ Change ☒ Addition
NAME **JOHN A. GERMAIN**
STREET ADDRESS **3224 BISCAYNE BOULEVARD, UNIT A3**
CITY-ST-ZIP **MIAMI FL 33137-4414**

TITLE **S/T** ☒ Delete
NAME **MANTON, CHIARA M**
STREET ADDRESS **3224 BISCAYNE BLVD, APT. F3**
CITY-ST-ZIP **MIAMI, FL 33137**

TITLE **S/T** ☐ Change ☒ Addition
NAME **CHRISTOPHER J. PODSTAWSKI**
STREET ADDRESS **3224 BISCAYNE BOULEVARD, UNIT E1**
CITY-ST-ZIP **MIAMI FL 33137**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

President

0408.07

305.331.7303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #