2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008165

FILED Apr 06, 2009 Secretary of State

Entity Na	me: PLAZA SAN	N REMO CONDOMINIUM	ASSOCIATION, INC.		
Current P	rincipal Place o	of Business:	New Principal Place	New Principal Place of Business:	
6705 RED RD STE 608 CORAL GABLES, FL 33143 US			6705 RED RD STE 604 CORAL GABLES, FL		
Current N	lailing Address	:	New Mailing Address	New Mailing Address:	
6705 RED STE 608 CORAL G	RD ABLES, FL 3314	13 US	6705 RED RD STE 604 CORAL GABLES, FL	33143 US	
FEI Number	: 20-1584225	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cu	rrent Registered Agent	: Name and Address o	f New Registered Agent:	
6705 RED STE 608	D. WILSON JR., RD. ABLES, FL 3314				
	e named entity su e of Florida.	bmits this statement for th	he purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electronic	Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D WILSON, JR, DOI 6705 RED RD, ST CORAL GABLES,	NALD D CPA, PA FE 608	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () D RODRIGUEZ-CER 6705 RED RD, ST CORAL GABLES,	PERO, JOSE TE 308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () D AIRAN-PACE, RA 6705 RED RD, ST CORAL GABLES,	SHMI FE 310	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DONALD D. WILSON JR. CPA 04/06/2009