

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90202 014 ****61.25

DOCUMENT # N04000009014

1. Entity Name
8966 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
8966 COLLINS AVENUE
SURFSIDE, FL 33154

Mailing Address
8966 COLLINS AVENUE
SURFSIDE, FL 33154



01252008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
20-1655897

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PINA, MIGUEL
8966 COLLINS AVENUE
SURFSIDE, FL 33154

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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, 2008**

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 PINA, MIGUEL 8966 COLLINS AVENUE SURFSIDE, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CEBALLOS, JOAQUIN 8966 COLLINS AVENUE SURFSIDE, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MOUTINHO, BETTY 8966 COLLINS AVENUE SURFSIDE, FL 33154
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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.

SIGNATURE: *Betty Moutinho*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/26/2008

Date

Daytime Phone #