

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009698

FILED
Apr 10, 2008
Secretary of State

Entity Name: THE BAMBOO HOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1242 ALTON RD.
MIAMI BEACH, FL 33139

New Principal Place of Business:

1242 ALTON ROAD
MIAMI BEACH, FL 33139

Current Mailing Address:

1242 ALTON RD.
MIAMI BEACH, FL 33139

New Mailing Address:

420 LINCOLN ROAD
SUITE 245
MIAMI BEACH, FL 33139

FEI Number: 20-1749350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RENEE M SMITH, ESQ PA
420 LINCOLN RD, SUITE 245
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEREZ, DIANA
Address: 1242 ALTON ROAD # 103
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPSD () Delete
Name: ADAMS, DAVID J
Address: 1242 ALTON ROAD, #101
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: NANAVICHIT, NICK
Address: 1242 ALTON ROAD # 204
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ADAMS, DAVID L
Address: 1242 ALTON ROAD # 101
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPSD (X) Change () Addition
Name: PEREZ-SUPRIN, DIANA
Address: 1242 ALTON ROAD, #103
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change () Addition
Name: NEISS, SHERWOOD
Address: 1242 ALTON ROAD # 206
City-St-Zip: MIAMI BEACH, FL 33139

Title: RSEC () Change (X) Addition
Name: NANAVICHIT, NICK
Address: 1242 ALTON ROAD #204
City-St-Zip: MIAMI BEACH, FL 33139

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: DAVID J ADAMS

PD

04/10/2008

Electronic Signature of Signing Officer or Director

Date