

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2007 8:00 am
Secretary of State

09-04-2007 90039 022 ****61.25

DOCUMENT # N04000011050

1. Entity Name
MARSH HARBOUR 50 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134**

Mailing Address
**2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134**

40131031



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

3. Mailing Address
2074 W. INDIANTOWN RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE # 200

08202007

Chg-NP

CR2E037 (12/06)

City & State

City & State

JUPITER, FL

4. FEI Number

20-4507200

Applied For

Not Applicable

Zip

Country

Zip

33456

Country

PO

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

**REGISTERED AGENTS OF FLORIDA, LLC
100 SE 2ND ST.
SUITE 2900
MIAMI, FL 33131-2130**

Name

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. 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 September 14, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
ADAMS, BRUCE
2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
SHANNON, KARR
2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**BARBARA SEGURISTAIN
2121 PONCE DE LEON BLVD
CORAL GABLES, FL 33134** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
GREENBERG, KIM
2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
MAXIMO CRUZ JR
2121 PONCE DE LEON BLVD.
CORAL GABLES FL 33134** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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STREET ADDRESS
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CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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:

Paula J. President

8/27/07

(786) 709-2250

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #