2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# N05000007317

Entity Name: BECKFORD PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5835 BLUE LAGOON, SUITE 200
MIAMI, FL 33126

New Principal Place of Business:

101 NE 3RD AVE
SUITE 1500
FORT LAUDERDALE, FL 33301

Current Mailing Address:

5835 BLUE LAGOON, SUITE 200
MIAMI, FL 33126

New Mailing Address:

101 NE 3RD AVE
SUITE 1500
FORT LAUDERDALE, FL 33301

FEI Number: 20-3169386 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAW OFFICES OF ANIBAL J. DUARTE-VIERA, PA
5835 BLUE LAGOON, SUITE 200
MIAMI, FL 33126 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: STD ( ) Delete
Name: DUARTE-VIERA, ANIBAL J
Address: 5835 BLUE LAGOON, SUITE 200
City-St-Zip: MIAMI, FL 33126

Title: PD ( ) Delete
Name: PARDO, ANTONIO
Address: 5835 BLUE LAGOON, SUITE 200
City-St-Zip: MIAMI, FL 33126

Title: VD ( ) Delete
Name: CORDERO, JOSE
Address: 5835 BLUE LAGOON, SUITE 200
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: A. STEVENS MS 04/29/2007

Electronic Signature of Signing Officer or Director — Date