

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 08, 2007 8:00 am**  
**Secretary of State**

03-08-2007 90011 044 \*\*\*\*61.25

DOCUMENT # N05000009455			
1. Entity Name PALMETTO BAY CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 9751 WAYNE AVENUE PALMETTO BAY, FL 33157		Mailing Address 2011 WEST 62ND STREET HIALEAH, FL 33016	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>20 AMERICAN Management</i> Suite, Apt. #, etc. <i>2011 W 62nd STREET</i>	
Suite, Apt. #, etc.		City & State <i>Hialeah, FL</i>	
City & State		4. FEI Number 20-3874172	
Zip		Country <i>U.S.A</i>	
Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN MANAGEMENT & REALTY, INC. 2011 WEST 62ND STREET HIALEAH, FL 33016		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			
TITLE	DP	<input checked="" type="checkbox"/> Delete	
NAME	DIAZ, JORGE		
STREET ADDRESS	9750 SW 92 AVE		
CITY-ST-ZIP	MIAMI, FL 33176		
TITLE	DS	<input checked="" type="checkbox"/> Delete	
NAME	DIAZ, ANA C		
STREET ADDRESS	9750 SW 92 AVE		
CITY-ST-ZIP	MIAMI, FL 33176		
TITLE	DT	<input checked="" type="checkbox"/> Delete	
NAME	GOMEZ, GILBERT		
STREET ADDRESS	9750 SW 92 AVE		
CITY-ST-ZIP	MIAMI, FL 33176		
TITLE	P	<input type="checkbox"/> Delete	
NAME	GUERRERO, LUIS		
STREET ADDRESS	9751 WAYNE AVENUE, #6		
CITY-ST-ZIP	PALMETTO BAY, FL 33157		
TITLE	T	<input type="checkbox"/> Delete	
NAME	BROWN, MARK		
STREET ADDRESS	8620 S.W. 163 TERRACE		
CITY-ST-ZIP	MIAMI, FL 33157		
TITLE	S	<input type="checkbox"/> Delete	
NAME	GERNERT, REBECCA		
STREET ADDRESS	15600 N.W. 67 AVENUE, STE 101		
CITY-ST-ZIP	MIAMI LAKES, FL 33014		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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: <i>Hilbert Army</i>		Date: <i>3/1/07</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #: <i>305-558-9820</i>	