

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012011

FILED  
Aug 21, 2009  
Secretary of State

**Entity Name:** BLUE WAVE CONDOMINIUM ASSOCIATION OF BREVARD COUNTY, INC.

**Current Principal Place of Business:**

300 WEST 41 STREET  
SUITE 201A  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

503 N. ORLANDO AVENUE  
SUITE 201  
COCOA BEACH, FL 32931

**Current Mailing Address:**

300 WEST 41 STREET  
SUITE 201A  
MIAMI BEACH, FL 33140

**New Mailing Address:**

503 N. ORLANDO AVENUE  
SUITE 201  
COCOA BEACH, FL 32931

**FEI Number:** 20-4168610      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BOAZIZ, MORDECHAI  
300 WEST 41 STREET  
201A  
MIAMI BEACH, FL 33140 US

**Name and Address of New Registered Agent:**

ESO BLUE WAVE, LLC  
503 N. ORLANDO AVENUE  
201  
COCOA BEACH, FL 32931 US

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: MICHAEL FARO

08/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: M ( ) Delete  
Name: BOAZIZ, MORDECHAI  
Address: 300 WEST 41 STREET #201A  
City-St-Zip: COCOA BEACH, FL 32931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: NAIMER, EFRAIM  
Address: 501 N. ORLANDO AVE, SUITE 201  
City-St-Zip: COCOA BEACH, FL 32931

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: EFRAIM NAIMER

P

08/21/2009

Electronic Signature of Signing Officer or Director

Date