## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000293

FILED Apr 09, 2008 Secretary of State

Entity Name: 18101 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 18101 COLLINS AVE SUNNY ISLES BCH, FL 33160 **Current Mailing Address: New Mailing Address:** TRUMP PALACE 18101 COLLLINS AVE SUNNY ISLES BCH, FL 33160 FEI Number: 20-3036288 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRALEY & OTTO, P.A. STRALEY & OTTO, P.A. 2699 STIRLING ROAD 2699 STIRLING ROAD SUITE CS07 SUITE C207 FT. LAUDERDALE, FL 33312 US FT. LAUDERDALE, FL 33312 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: 04/09/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MAST. PAUL WILLIAM, ALBERT Name: Name: 18101 COLLINS AVE #PH 207 Address: 18101 COLLINS AVE Address: City-St-Zip: SUNNY ISLES BCH, FL 33160 City-St-Zip: SUNNY ISLES BCH, FL 33160 Title: Title: (X) Change ( ) Addition () Delete NIETO, ZOIBO Name: SHLIFER, SIMON Name: Address: 18101 COLLINS AVE #1907 Address: 18101 COLLINS AVE City-St-Zip: SUNNY ISLES BCH, FL 33160 City-St-Zip: SUNNY ISLES BCH, FL 33160 Title: () Delete Title: SD (X) Change ( ) Addition DEZER, GIL DEZER, GIL Name: Name: 18101 COLLINS AVE #409 Address: Address: 18101 COLLINS AVE City-St-Zip: SUNNY ISLES BCH, FL 33160 City-St-Zip: SUNNY ISLES BCH. FL 33160 Title: () Delete Title: ( ) Change (X) Addition Name: Name: LEVY, LINDA Address: Address: 18101 COLLINS AVE City-St-Zip: City-St-Zip: SUNNY ISLES BEACH, FL 33160 Title: () Delete Title: ( ) Change (X) Addition KOSSON, LEN Name: Name: 18101 COLLINS AVE Address: Address: City-St-Zip: City-St-Zip: SUNNY ISLES BEACH, FL 33009

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: ROGER J FORBES MGR 04/09/2008