

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004569

FILED
Jun 22, 2007
Secretary of State

Entity Name: SAGE ON LENOX CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

309 23RD STREET SUITE 300
MIAMI BEACH, FL 33139

New Principal Place of Business:

1045 LENOX AV
MIAMI BEACH, FL 33139

Current Mailing Address:

309 23RD STREET SUITE 300
MIAMI BEACH, FL 33139

New Mailing Address:

635 EUCLID AV
112
MIAMI BEACH, FL 33139

FEI Number: 20-2362845 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:

BROWN, GARY L
4000 HOLLYWOOD BLVD SUITE 265S
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

CORTESPATRICK PROPERTY MANAGERS
635 EUCLID AC
112
MIAMI BEACH, FL 33139 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: CARLOS CORTES

06/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BURSTYN, DAVID
Address: 12000 BISCAYNE BLVD #409
City-St-Zip: MIAMI, FL 33181

Title: VSD () Delete
Name: BURSTYN, BRADLEY
Address: 12000 BISCAYNE BLVD #409
City-St-Zip: MIAMI, FL 33181

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: NOVELA, MARCELLA
Address: 5242 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: VSD (X) Change () Addition
Name: CASAN, VICENTA
Address: 1045 LENOX AV #2
City-St-Zip: MIAMI BEACH, FL 33139

Title: TSD () Change (X) Addition
Name: SCHNEIDER, DANIEL
Address: 1045 LENOX AV # 11
City-St-Zip: MIAMI BEACH, FL 33139

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: CARLOS CORTES

AGEN

06/22/2007

Electronic Signature of Signing Officer or Director

Date