

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

04-02-2007 90074 002 ****61.25

DOCUMENT # N06000004849					
1. Entity Name MARINA MILE BUSINESS PARK COMMERCIAL CONDOMINIUM ASSOCIATION IV, INC.					
Principal Place of Business 400 SANTA CLARA TRAIL WELLINGTON, FL 33414			Mailing Address 400 SANTA CLARA TRAIL WELLINGTON, FL 33414		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03262007 Chg-NP CR2E037 (12/06)	
4. FEI Number 20-5572605				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MANSFIELD, RAYMOND D 400 SANTA CLARA TRAIL WELLINGTON, FL 33414			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reappointing) Signature, typed or printed name of registered agent and title if applicable. DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME CABRERA, ANTONIO J JR. STREET ADDRESS 782 NW 42ND AVE., SUITE 555 CITY-ST-ZIP MIAMI, FL 33128	☒ Delete		TITLE P NAME RAYMOND MANSFIELD STREET ADDRESS 400 SANTA CLARA TRAIL CITY-ST-ZIP WELLINGTON, FL. 33414	☐ Change ☒ Addition	
TITLE VD NAME RUBIN, JEFF E STREET ADDRESS 1320 SOUTH DIXIE HWY., SUITE 881 CITY-ST-ZIP CORAL GABLES, FL 33146	☒ Delete		TITLE T NAME JEFF WINEPOL STREET ADDRESS 400 SANTA CLARA TRAIL CITY-ST-ZIP WELLINGTON, FL. 33414	☐ Change ☒ Addition	
TITLE STD NAME BIGGER, WILLIAM A STREET ADDRESS 3001 SR 84 CITY-ST-ZIP FT. LAUDERDALE, FL 33312	☒ Delete		TITLE S NAME SHABBAR ELUDDIN STREET ADDRESS 400 SANTA CLARA TRAIL CITY-ST-ZIP WELLINGTON, FL. 33414	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u>Raymond D. Mansfield</u> <u>3/29/07</u> <u>954-791-9666</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					