

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 15, 2009
Secretary of State

DOCUMENT# N06000006341

Entity Name: 500 SOUTH DIXIE HIGHWAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**500 S. DIXIE HIGHWAY
SUITE 201
CORAL GABLES, FL 33146**New Principal Place of Business:**500 S. DIXIE HIGHWAY
CORAL GABLES, FL 33146**Current Mailing Address:**500 S. DIXIE HIGHWAY
SUITE 201
CORAL GABLES, FL 33146**New Mailing Address:**500 S. DIXIE HIGHWAY
201
CORAL GABLES, FL 33146**FEI Number:** 20-5813383**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SKINNER, TRUMAN A
500 S. DIXIE HIGHWAY
SUITE 201
CORAL GABLES, FL 33146 US**Name and Address of New Registered Agent:**SKINNER, TRUMAN A
500 S. DIXIE HIGHWAY
SUITE 307
CORAL GABLES, FL 33146 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: TRUMAN A. SKINNER

05/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: SKINNER, TRUMAN A
Address: 500 S. DIXIE HIGHWAY, SUITE 307
City-St-Zip: CORAL GABLES, FL 33146**Title:** DS () Delete
Name: DE LEON, NELSON
Address: 500 S. DIXIE HIGHWAY, SUITE 310
City-St-Zip: CORAL GABLES, FL 33146**Title:** DT () Delete
Name: MILLARES, RUBEN
Address: 500 S. DIXIE HIGHWAY, SUITE 201
City-St-Zip: CORAL GABLES, FL 33146**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: JUNKIN, CYNTHIA
Address: 500 S. DIXIE HIGHWAY, SUITE 303
City-St-Zip: CORAL GABLES, FL 33146**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: RUBEN MILLARES

DT

05/15/2009

Electronic Signature of Signing Officer or Director

Date