

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006341

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** 500 SOUTH DIXIE HIGHWAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

500 S. DIXIE HIGHWAY  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

500 S. DIXIE HIGHWAY  
201  
CORAL GABLES, FL 33146

**New Mailing Address:**

**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 307  
CORAL GABLES, FL 33146 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** DE LEON, NELSON  
**Address:** 500 S. DIXIE HIGHWAY, SUITE 310  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** DV  
**Name:** INFANTE, EMIL  
**Address:** 500 S. DIXIE HIGHWAY, SUITE 302  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** DT  
**Name:** MILLARES, RUBEN  
**Address:** 500 S. DIXIE HIGHWAY, SUITE 201  
**City-St-Zip:** CORAL GABLES, FL 33146

I hereby 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 all other like empowered.

**SIGNATURE:** RUBEN M. MILLARES

DT

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date