2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000007393

T FILED

Nov 11, 2008

Secretary of State

Entity Name: GRAND TURNING POINTE BUSINESS CENTER I ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4000 PONCE DE LEON BLVD #400 16575 SW 117TH AVENUE

CORAL GABLES, FL 33146 MIAMI, FL 33177

Current Mailing Address: New Mailing Address:

4000 PONCE DE LEON BLVD #400 16575 SW 117TH AVENUE

CORAL GABLES, FL 33146 MIAMI, FL 33177

FEI Number: 13-4338219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAMACHO, ANA M ESQ.
4000 PONCE DE LEON BLVD #400
CORAL GABLES, FL 33146 US

NUNEZ, ANDRES R
16575 SW 117TH AVENUE
MIAMI, FL 33177 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: ANDRES R. NUNEZ 11/11/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 NUNEZ, ANDRÉS R
 Name:
 NUNEZ, ANDRÉS R

 Address:
 16215 SW 117 AVE UNIT #1
 Address:
 16575 SW 117TH AVENUE

City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177

Title: VD () Delete Title: VPD (X) Change () Addition

Name: ILLA, RENE D Name: ILLA, RENE D

Address: 16215 SW 117 AVE UNIT #1 Address: 16575 SW 117TH AVENUE

City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177

Title: D () Delete Title: D (X) Change () Addition Name: CAMACHO, ANA M Name: CANALS, WALDO

Address: 4000 PONCE DE LEON BLVD #400 Address: 16575 SW 117TH AVENUE

City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: MIAMI, FL 33177

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: ANDRES R. NUNEZ PSTD 11/11/2008