


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2008 8:00 am**  
**Secretary of State**

01-31-2008 90023 033 \*\*\*\*61.25

<b>DOCUMENT # N06000007408</b> 1. Entity Name <b>BANYAN RIDGE CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <del>8330 DEVON ROAD</del> <b>COCONUT GROVE, FL 33133</b>			Mailing Address <del>8330 DEVON ROAD</del> <b>COCONUT GROVE, FL 33133</b>		
2. Principal Place of Business - No P.O. Box # <b>3595 Anchorage Way</b>		3. Mailing Address <b>3595 Anchorage Way</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Coconut Grove FL</b>		City & State <b>Coconut Grove FL</b>		4. FEI Number <b>20-5199263</b>	
Zip <b>33133</b>		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MILLARES, MARIA</b> <del>8330 DEVON ROAD</del> <del>COCONUT GROVE, FL 33133</del>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>500 So. Dixie Hwy,</b> <b>#201</b> City <b>C. Gables</b> <b>FL</b> Zip Code <b>33146</b>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEWIS, JONATHAN D <input type="checkbox"/> Delete <del>8330 DEVON ROAD</del> <b>COCONUT GROVE, FL 33133</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>3595 Anchorage Way</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEWIS, PETER B <input type="checkbox"/> Delete <del>8330 DEVON ROAD</del> <b>COCONUT GROVE, FL 33133</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>3595 Anchorage Way</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEWIS, ADAM J <input type="checkbox"/> Delete <del>8330 DEVON ROAD</del> <b>COCONUT GROVE, FL 33133</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>3595 Anchorage Way</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
<b>SIGNATURE:</b> <i>Jonathan Lewis</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>1-21-08 305 669-8190</b> <small>Date Daytime Phone #</small>		