

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007513

FILED
Apr 29, 2008
Secretary of State

Entity Name: THE FALLS AT NEW TAMPA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

301 ARTHUR GODFREY RD - STE 502
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

301 ARTHUR GODFREY RD - STE 502
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 20-5408184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENSPOON MARDER, P.A.
TRADE CENTRE SOUTH - STE 700
100 W CYPRESS CREEK RD
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

ATLANTIC & PACIFIC MANAGEMENT
800 PALM TRAIL
SUITE 2
DELRAY BEACH, FL 33483 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: SANFORD FOX

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: APPEL, BARRY
Address: 301 ARTHUR GODFREY RD - STE 502
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPSD () Delete
Name: BERKOWITZ, ABBEY
Address: 301 ARTHUR GODFREY RD - STE 502
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: ARAGON, HECTOR
Address: 301 ARTHUR GODFREY RD - STE 502
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SANFORD FOX

MNGR

04/29/2008

Electronic Signature of Signing Officer or Director

Date