2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Mar 12, 2008 8:00 am
Secretary of State
03-12-2008 90031 006 ****61.25

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1. Entity Name
MADISON DOWNTOWN CONDOMINIUM ASSOCIATION, INC.

40043721

Principal Place of Business	Mailing Address
9095 SW 87TH AVENUE SUITE 777 MIAMI, FL 33176	9095 SW 87TH AVENUE SUITE 777 MIAMI, FL 33176

01102008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
20-5068776
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MELAND RUSSIN & BUDWICK, P.A.
200 SOUTH BISCAYNE BLVD.
SUITE 3000
MIAMI, FL 33131

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SIMKINS, RONALD S
STREET ADDRESS	9095 SW 87TH AVENUE #777
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	BD
NAME	SHERRY, ALEX
STREET ADDRESS	9095 SW 87TH AVENUE #777
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	STD
NAME	LOPEZ, YOLANDA
STREET ADDRESS	9095 SW 87TH AVENUE #777
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: _____ Ronald Simkins 3/10/08 305-270-0870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #