

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000594

FILED
Mar 03, 2010
Secretary of State

Entity Name: BLOCK 4B ASSOCIATION, INC.

Current Principal Place of Business:

1441 BRICKELL AVENUE
SUITE 1011
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1441 BRICKELL AVENUE
SUITE 1011
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-8325509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: VPD
Name: BROWN, WILLIAM
Address: 1441 BRICKELL AVE, SUITE 1011
City-St-Zip: MIAMI, FL 33131

Title: D
Name: CRAIG, GEORGE
Address: 1441 BRICKELL AVE, SUITE 1011
City-St-Zip: MIAMI, FL 33131

Title: D
Name: HURST, CONNIE
Address: 1441 BRICKELL AVE, SUITE 1011
City-St-Zip: MIAMI, FL 33131

Title: STD
Name: PETRICOLA, JOHN
Address: 1441 BRICKELL AVE, SUITE 1011
City-St-Zip: MIAMI, FL 33131

Title: DIR
Name: FLATLEY, SCOTT
Address: 1441 BRICKELL AVE, SUITE 1011
City-St-Zip: MIAMI, FL 33131

Title: P
Name: JONES, EDGAR
Address: 1441 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

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: EDGAR JONES

P

03/03/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date