

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**FILED
Jun 06, 2008
Secretary of State**

DOCUMENT# N07000005600

Entity Name: BEACHCOMBER OF NOBE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**6000 ISLAND BLVD #503
AVENTURA, FL 33160**New Principal Place of Business:**320 85 STREET
MIAMI BEACH, FL 33141**Current Mailing Address:**6000 ISLAND BLVD #503
AVENTURA, FL 33160**New Mailing Address:**16275 COLLINS AVENUE
APT. 1201
SUNNY ISLES BEACH, FL 33160**FEI Number:** **FEI Number Applied For** () **FEI Number Not Applicable** (X) **Certificate of Status Desired** ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**BAUM, RACHEL
6000 ISLAND BLVD #503
AVENTURA, FL 33160 US**Name and Address of New Registered Agent:**BAUM, RACHEL
16275 COLLINS AVENUE
APT. 1201
SUNNY ISLES BEACH, FL 33160 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: RACHEL BAUM

06/06/2008

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:**Title: DP () Delete
Name: BAUM, LOREN
Address: 9172 FROUDE AVENUE
City-St-Zip: SURFSIDE, FL 33154Title: DVP () Delete
Name: BAUM, PAUL
Address: 6000 ISLAND BLVD #503
City-St-Zip: AVENTURA, FL 33160Title: DST () Delete
Name: BAUM, RACHEL
Address: 6000 ISLAND BLVD #503
City-St-Zip: AVENTURA, FL 33160**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: RACHEL BAUM

DST

06/06/2008

Electronic Signature of Signing Officer or Director

Date