2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008347

Entity Name: 568 CONDOMINIUM ASSOCIATION, INC.

FILED Apr 18, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5301 N. FEDERAL HIGHWAY SUITE 150 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

5301 N. FEDERAL HIGHWAY SUITE 150 BOCA RATON, FL 33487

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEHMAN, JONATHAN

5301 N. FEDERAL HIGHWAY

SUITE 150

BOCA RATON, FL 33487 US

JHL REGISTERED AGENT, LLC

5301 N. FEDERAL HIGHWAY

SUITE 150

BOCA RATON, FL 33487 US

BOCA RATON, FL 33487 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: JONATHAN H. LEHMAN 04/18/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name: LEHMAN, JERRY Name: MAZZA, DAVID
Address: 5301 N. FEDERAL HIGHWAY #150 Address: 1100 SE 3RD AVE.

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VTD () Delete Title: VPD (X) Change () Addition

Name: LEHMAN, JONATHAN Name: LEHMAN, JERRY

 Address:
 5301 N. FEDERAL HIGHWAY #150
 Address:
 5301 N. FEDERAL HIGHWAY #150

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 BOCA RATON, FL 33487

 $\label{eq:title:Title:TD} \textit{Title:} \qquad \textit{SD} \qquad \textit{() Delete} \qquad \qquad \textit{Title:} \qquad \textit{TD} \qquad \textit{(X) Change () Addition}$

Name: PORRAS, ELIAS Name: LECORGNE, NEILL

 Address:
 5301 N. FEDERAL HIGHWAY #150
 Address:
 1100 SE 3RD AVE.

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 FT. LAUDERDALE, FL 33316

City-31-Zip. BOCA RATON, PL 33467 City-31-Zip. PT. LAODERDALE, PL 33316

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

Name:KHALIL, SUZANNEName:ABRAMS, MARILYNAddress:5301 N. FEDERAL HIGHWAY #150Address:5255 N. FEDERAL HIGHWAY

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487

Name: LEHMAN, ELIZABETH Name: LEHMAN, JONATHAN

Address: 5301 N. FEDERAL HIGHWAY #150
City-St-Zip: BOCA RATON, FL 33487
Address: 5301 N. FEDERAL HIGHWAY #150
City-St-Zip: BOCA RATON, FL 33487

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: JONATHAN H. LEHMAN D 04/18/2008