

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010045

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** MONTCLAIR AT MIRAMAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**New Principal Place of Business:**

MIAMI MANAGEMENT, INC.  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**Current Mailing Address:**

1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**New Mailing Address:**

MIAMI MANAGEMENT, INC.  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

FEI Number: 26-1256084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KATZMAN GARFINKEL  
1501 SW 49TH STREET  
2ND FLOOR  
FT. LAUDERDALE, FL 33309 US

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

KATZMAN, GARFINKEL, ROSENBAUM, P.A.  
1501 SW 49TH STREET  
2ND FLOOR  
FT. LAUDERDALE, FL 33309 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: LEE KATZMAN

01/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: IBARRIA, DIANA  
Address: 1145 SAWGRASS CORPORATE PKWY  
City-St-Zip: SUNRISE, FL 33323

Title: DVP  
Name: MESSER, K C  
Address: 1145 SAWGRASS CORPORATE PKWY  
City-St-Zip: SUNRISE, FL 33323

Title: DST  
Name: DEBOCK, MICHAEL  
Address: 1145 SAWGRASS CORPORATE PKWY  
City-St-Zip: SUNRISE, FL 33323

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: MICHAEL DEBOCK

DST

01/18/2010

Electronic Signature of Signing Officer or Director

Date