

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90041 007 ****61.25

DOCUMENT # N07034

1. Entity Name

HAVEN APARTMENTS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

% BOARD OF DIRECTORS
10250 W. BAY HARBOR DR.
BAY HARBOR ISLANDS FL 33154
US

Mailing Address

16499 NE 19 AVE
107
MIAMI FL 33162
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0931605

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERTIK, ALLEN
10250 W. BAY HARBOR DR
BAY HARBOR ISLES FL 33154

Name

MAURICE BARRERO

Street Address (P.O. Box Number is Not Acceptable)

10250 WEST BAY Harbor Dr #3E

BAY Harbor Is.

City

BAY Harbor Is

FL

Zip Code

33154

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/31/06
DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME P
BARRERO, MAURICE
STREET ADDRESS 10250 W. BAY HARBOR DR
CITY-ST-ZIP MIAMI BEACH FL 33154

TITLE ☐ Delete

NAME T
OSUALDO PEREZ
STREET ADDRESS 10250 W BAY HARBOR DR.
CITY-ST-ZIP B. HARBOR ISLANDS FL

TITLE ☐ Delete

NAME VP
ROBINSON, HELEAN
STREET ADDRESS 10250 W BAY HARBOR DR.
CITY-ST-ZIP MIAMI BEACH FL 33154

TITLE ☐ Delete

NAME S
REARDON, CONNIE
STREET ADDRESS 10250 W. BAY HARBOR DR
CITY-ST-ZIP MIAMI BEACH FL 33154

TITLE ☒ Delete

NAME D
ROBINSON, MELENA
STREET ADDRESS 10250 W BAY HARBOR DR
CITY-ST-ZIP B HARBOR ISLANDS FL

TITLE ☐ Delete

NAME D
GHILANDI, TERESA Y
STREET ADDRESS 10250 W. BAY HARBOR DRIVE
CITY-ST-ZIP MIAMI BEACH FL 33154

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

1/31/06