

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 01, 2011**  
**Secretary of State**

DOCUMENT# N08000006004

**Entity Name:** SOUTH OF FIFTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**125 OCEAN DRIVE  
SUITE 108  
MIAMI BEACH, FL 33139 US**New Principal Place of Business:****Current Mailing Address:**125 OCEAN DRIVE  
SUITE 108  
MIAMI BEACH, FL 33139 US**New Mailing Address:****FEI Number:** 26-3281269**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LERNER, LISA A  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**SKRLD, INC  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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: LERNER LISA

04/01/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** P  
**Name:** BURNS, ANTHONY  
**Address:** 125 OCEAN DRIVE, SUITE 108  
**City-St-Zip:** MIAMI BEACH, FL 33139 US**Title:** VP  
**Name:** HELMSTETTER, GEORGE  
**Address:** 125 OCEAN DRIVE, SUITE 108  
**City-St-Zip:** MIAMI BEACH, FL 33139 US**Title:** S/T  
**Name:** MUSIAL, DONNA  
**Address:** 125 OCEAN DRIVE, SUITE 108  
**City-St-Zip:** MIAMI BEACH, FL 33139 FL

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: GEORGE HELMSTETTER

VP

04/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date