## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED

Feb 05, 2007 8:00 am Secretary of State

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## **DOCUMENT # N27485**

MEDITERRANEAN VILLAGE CONDOMINIUM NO. ONE



ASSOCIATION, INC. Principal Place of Business Mailing Address 3900 ISLAND BLVD 3700 ISLAND BLVD 60011489 AVENTURA, FL 33160 AVENTURA FL 33160 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. # etc. Suite, Apt. #, etc. 01092007 CR2E037 (12/06) City & State City & State 4. FEI Number 65-0071225 Applied For Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GLAZER, ERIC ESQ. Street Address (P.O. Box Number is Not Acceptable) 1920 EAST HALLANDALE BEACH BLVD 8TH FLOOR HALLANDALE, FL 33009 Zip Code City FI. 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relistating) DATE 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Р **SECRETARY** TITLE ☐ Delete TITL F XXX Change ■ Addition SUTTIN, DORIS MALE NAME DORIS SUTTIN 3900 ISLAND BLVD STREET ADDRESS STREET ADDRESS AVENTURA, FL 33160 CITY-ST-ZIP CITY-ST-ZIP VΡ TITLE Delete TITLE PRESIDENT XXX Change ☐ Addition DAVIS, EDWARD NAME NAME EDWARD DAVIS 3900 ISLAND BLVD STREET ADORESS STREET ADDRESS CITY-ST-7P AVENTURA, FL 33160 CITY-ST-ZIP XXX Delete TITLE TETLE VICE PRESIDENT Change XXXAddition NAME CONSTANZO, RICHARD NAME H. JOEL RAHN STREET ADORESS 3900 ISLAND BLVD, B208 STREET ADDRESS 3900 Island Blvd #B406 CITY-ST-ZIP AVENTURA, FL 33160 CITY-ST-ZIP Aventura, FL 33160 TITLE Delete TITLE TREASURER XXX Change Addition KRAMARZ, HENRY NAME NAME HENRY KRAMARZ STREET ADDRESS 3900 ISLAND BLVD STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33160 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition HOUTKIN, HARVEY NAME NAME STREET ADORESS 3900 ISLAND BLVD BPH4 STREET ADORESS AVENTURA, FL 33160 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP COY-ST-ZP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Horida 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 agreederss, with at other like empowered.

SIGNATURE: