04201999-90177-005-$61.25-$61.25

FILED
Apr 20, 1999 8:00 am
Secretary of State
04-20-1999 90177 005 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N27833

1. Corporation Name

GABLES LAROC CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
441 VALENCIA AVE CORAL GABLES FL 33134 US	441 VALENCIA AVE CORAL GABLES FL 33134 US

2. Principal Place of Business
21 441 Valencia Ave
Suite, Apt. #, etc.
22 Coral Gables Fl 33134
City & State
23
Zip 24 33134 Country 25 USA

2a. Mailing Address
26 441 Valencia Ave
Suite, Apt. #, etc.
27 Coral Gables Fl
City & State
28
Zip 29 33134 Country 30 USA

3. Date Incorporated or Qualified
08/10/1988

4. FEI Number
65-0105755
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

PANEBIANCO, FRANK
441 VALENCIA AVE
S1201
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: BARBARA HERTZ
82 Street Address (P.O. Box Number is Not Acceptable): 441 Valencia Ave
83 apt. 1001
84 City: Coral Gables FL 85 Zip Code: 33134

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Barbara V. Hertz 4/12/99
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST TRIBBLE, JAMES 441 VALENCIA AVE 1002 CORAL GABLES FL 33134	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Weidenbaum, ROBERT 441 Valencia Ave. Penthouse Coral Gables, Fl 33134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD D HERZOG, WILLIAM 441 VALENCIA #901 CORAL GABLES FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	T D William Herzog 441 Valencia #901 Coral Gables, Florida 33134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P D HERTZ, BARBARA 441 VALENCIA AVE 1001 CORAL GABLES FL 33134	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	P D Hertz, Barbara 441 Valencia Ave #1001 Coral Gables, Florida 33134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Barbara V. Hertz SIGNATURE REQUIRED X 4/12/99 305-854-2138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (1/1/98)