2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N29472

1. Entity Name
3000 ISLAND BOULEVARD CONDOMINIUM



FILED	
Jul 05, 2007 8:00 a	m
Secretary of State	
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07-05-2007 90060 036 ****61.25

ASSOCIA	ATION, INC.			TELES!			
Principal Place of Business Mailing Address 3000 ISLAND BLVD 3000 ISLAND BLVD WILLIAMS ISLAND AVENTURA, FL 33160 AVENTURA, FL 33160)		I NEKNISI KIK NISIS ININ KISII ISBID KSI BISH BISH BISH BISH BISH BISH BISH			
2. Principal Place of Business - No P.O. Box # 3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.				07022007 Chg-NP CR2E037 (12/06)			
City & Stat	te	City & State			4. FEI Number Applied For 65-0090625 Not Applicable		
Zip	Country	Zip	Country		5. Certificate of Status Desired		
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent		
			Name				
SKRLD, IN							
201 ALHAMBRA CIRCLE, SUITE 1102 Sire CORAL GABLES, FL 33134				eet Address (P.O. Box Number is Not Acceptable)			
			City		7:- C-d-		
			City		FL Zip Code		
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) DATE							
D	Filing Fee is \$61.25 ue by September 14, 2007		mpaign Financing Contribution.	_ ,	\$5.00 May Be Added to Fees Make check payable to Fiorida Department of State		
10.	OFFICERS AND DIE	RECTORS	11.	ΑΓ	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	Р	☐ Defete	TITLE	<u> </u>	Change Addition		
NAME	KLEIN, NORMAN	Delete	NAME		Change Addition		
STREET ADDRESS	3000 ISLAND BLVD SUITE 1703		STREET ADDRESS	,			
CITY-ST-ZIP	AVENTURA, FL 33180		CITY-ST-ZIP				
TITLE	T	☐ Delete	TITLE				
NAME	GOODMAN, MARTIN	LL Delae	NAME		Change Addition		
STREET ADDRESS	3000 ISLAND BLVD SUITE 1503		STREET ADDRESS	;			
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 3316	60	CITY-ST-ZIP				
TITLE	s	☐ Delete	TITLE	3	Addition		
NAME	SWARTE, RAE	L Delac	NAME	Kur	DARV Rewinder		
STREET ADDRESS	3000 ISLAND BLVD STE 2603		STREET ADDRESS	3000	DARY, BENJAMIN O ISIAND BIND. STE. 705		
CITY-ST-ZIP	AVENTURA, FL 33160		CITY-ST-ZIP		NTURA, FIA 33160		
TITLE	VP	☐ Delete	TITLE	74.0	☐ Change ☐ Addition		
NAME	SLAVIN, RICHARD		NAME		☐ creatige ☐ Addition		
STREET ADDRESS	3000 ISLAND BLVD #TH03		STREET ADDRESS	;			
CITY-ST-ZIP	AVENTURA, FL 33160		CITY-ST-ZIP				
TITLE	D	Delete	TITLE	۵	☐ Change ☐ Addition		
NAME	KUDARY, BENJAMIN		NAME	WA	LLACK, EDWARD		
STREET ADDRESS	3000 ISLAND BLVD SUITE 705		STREET ADDRESS	3000	LLACK, EDWARD . 1512AND Blud STE. 2602		
	I		CITY-ST-ZIP	Aure	NTURA, FU 33/60		
CITY-ST-ZIP	AVENTURA, FL 33160	······			33/60		
TITLE	D	D-Beleie	TITLE	D	Change Change		
TITLE NAME	D WERNER, ROBERT	□ belel e		D	Change Change		
TITLE NAME STREET ADDRESS	D WERNER, ROBERT 3000 ISLAND BLVD, # 3001	□ bei de	TITLE	3000	Change Addition Shann, Manshall Shand Blud STellol		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WERNER, ROBERT 3000 ISLAND BLVD, # 3001 AVENTURA, FL 33160		TITLE NAME STREET ADDRESS CITY-ST-ZIP	FUR 3000 Ave			

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 earth; 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, I further certify that the information 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 the corporation or the receiver or trustee empowered.

MARTIN B, GOORMAN

D

Gray, Barry 3000 Island Blvd. ste. WS05 Aventura, Fla. 33160

Addition