

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 26, 2011
Secretary of State

DOCUMENT# N36782

Entity Name: THE GABLES CONDOMINIUM AND CLUB ASSOCIATION, INC.**Current Principal Place of Business:**10 EDGEWATER DR
SUITE 6
CORAL GABLES, FL 33133**New Principal Place of Business:****Current Mailing Address:**10 EDGEWATER DR
SUITE 6
CORAL GABLES, FL 33133**New Mailing Address:****FEI Number:** 65-0350623**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BLAXBERG, GRAYSON, KUKOFF & SEGAL, P.A.
25 S.E. SECOND AVENUE
SUITE 730
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: STONE, ROBERT
Address: 10 EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33133

Title: T
Name: RATZAN, JUDITH
Address: 10 EDGEWATER DRIVE
City-St-Zip: CORAL GABLES, FL 33133

Title: DIR
Name: KEON, PATRICIA
Address: 60 EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33133

Title: DIR
Name: FINK, RENEE B
Address: 10 EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33133

Title: DIR
Name: VALLENILLA, DIEGO
Address: 60 EDGEWATER DRIVE
City-St-Zip: CORAL GABLES, FL 33133

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: HERNAN GEHR

OFF

04/26/2011

Electronic Signature of Signing Officer or Director

Date