

2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 14, 2004
Secretary of State

DOCUMENT# N47900

Entity Name: 900 MERIDIAN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**900 MERIDIAN AVE
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 402336
MIAMI BEACH, FL 33140**New Mailing Address:****FEI Number:** 65-0355943**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BENNETT, JOAN
518 NE 72 STREET
MIAMI, FL 33138 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: D () Delete
Name: BATOON, HEROLD LEE
Address: 900 MERIDIAN AVE, UNIT 102
City-St-Zip: MIAMI BEACH, FL 33139

Title: PSD () Delete
Name: DETRICK, BRIAN
Address: 900 MERIDIAN AVE, UNIT 204
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: DIPRIZITO, JOHN
Address: 3 ISLAND AVE. UNIT 4E
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: LLOYD, CRISTINA
Address: 900 MERIDIAN AVE, UNIT 110
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: MOFFETT, CHERYL
Address: 12330 SW 95 TER
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: CHIRCU, RAZVAN
Address: 900 MERIDIAN AVE, UNIT 212
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: CRUZ, JESSICA
Address: 900 MERIDIAN AVE, UNIT 105
City-St-Zip: MIAMI BEACH, FL 33139

Title: PSD (X) Change () Addition
Name: DETRICK, BRIAN
Address: 900 MERIDIAN AVE, UNIT 204
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN DETRICK

PSD

12/14/2004

Electronic Signature of Signing Officer or Director_____
Date