## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 01, 2006 DOCUMENT# N47900 Secretary of State

Entity Name: 900 MERIDIAN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

900 MERIDIAN AVE MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 402336 MIAMI BEACH, FL 33140

FEI Number: 65-0355943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENNETT, JOAN 763 41ST STREET SUITE C MIAMI BEACH, FL 33140 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Delete

DETRICK, BRIAN DETRICK, BRIAN Name: Name: Address: 900 MERIDIAN AVE, UNIT 204 Address: 900 MERIDIAN AVE, UNIT 204 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

Title: Title: (X) Change ( ) Addition ( ) Delete Name: MERKER, KENNETH Name: MERKER, KENNETH Address: 4424 NE 1ST AVENUE Address: 4424 NE 1ST AVENUE

City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33137

Title: () Delete Title: T/D (X) Change ( ) Addition SKINDZIER, KATHRYN Name: MAFDALI, VALERIE Name:

900 MERIDIAN AVE, UNIT 210 241 POINCIANA ISLAND DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 P/D 03/01/2006