2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 23, 2009
Secretary of State

DOCUMENT# N92000000548

Entity Name: MARSEILLES DECO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1255 MARSEILLES DR
ASSOCIATION OFFICE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

PO BOX 414282
MIAMI BEACH, FL 33141 US

New Mailing Address:

FEI Number: 65-0402545 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

URBAN RESOURCE
1181 71ST STREET
MIAMI BEACH, FL 33141 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: P ( ) Delete
Name: SUAZO, HANZY
Address: 1265 MARSEILLES DR #129
City-St-Zip: MIAMI BEACH, FL 33141

Title: T ( ) Delete
Name: CORYELL, MARIO
Address: 1255 MARSEILLES DR SUITE 124
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP ( ) Delete
Name: BAMBERG, BARRIE
Address: 1275 MARSEILLES DR SUITE 136
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: NEWMAN, TERRI
Address: 1275 MARSEILLE DR, SUITE 141
City-St-Zip: MIAMI BEACH, FL 33141

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D ( ) Change (X) Addition
Name: SUTTER, MARY
Address: 1265 MARSEILLE DR. #134
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify 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: MARY SUTTER D 10/23/2009

Electronic Signature of Signing Officer or Director — Date