

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000686

FILED
Jan 20, 2009
Secretary of State

Entity Name: THE DECOPLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 LINCOLN ROAD
MIAMI BEACH, FL 33139

New Principal Place of Business:

100 LINCOLN ROAD
MGMT OFFICE
MIAMI BEACH, FL 33139

Current Mailing Address:

100 LINCOLN ROAD
MIAMI BEACH, FL 33139

New Mailing Address:

100 LINCOLN ROAD
MGMT OFFICE
MIAMI BEACH, FL 33139

FEI Number: 65-0390632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOMEZ, MICHAEL W ESQ
1930 TYLER STREET
HOLLYWOOD, FL 33020 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: PD () Delete
Name: ROBERTS, SHERRY
Address: 100 LINCOLN ROAD,PH-2
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: GRANT, BARBARA
Address: 100 LINCOLN RD #910
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: WILSON, BRIAN
Address: 100 LINCOLN RD PH 7
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: LEVY, RAQUEL
Address: 100 LINCOLN RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: GARCIA, MARIA J
Address: 100 LINCOLN RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: OFF () Delete
Name: CHAVES, LINDY
Address: 100 LINCOLN RD
City-St-Zip: MIAMI BEACH, FL 33139

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: () 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 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 WILSON

D

01/20/2009

Electronic Signature of Signing Officer or Director

Date