## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 21, 2008 8:00 am Secretary of State 04-21-2008 90051 011 \*\*\*150.00 DOCUMENT # N93000000474 1. Entity Name THE ROOSEVELT CONDOMINIUM ASSOCIATION, INC. 40010200 Principal Place of Business Mailing Address 1255 PENNSYLVANIA AVE 1255 PENNSYLVANIA AVE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04152008 CR2E034 (12/06) City & State City & State Applied For 4. FEI Number 65-0464887 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSE, JOANNE Street Address (P.O. Box Number is Not Acceptable) 1255 PENNSYLVANIA AVE STE #211 MIAMI BEACH, FL 33139 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PTD TITLE ■ Delete TITLE ☐ Change CROFT, WILLIAM NAME 1255 PENNSYLVANIA AVE., #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-SI-7IP VDTR ☐ Delete TITLE ☐ Change ☐ Addition ROSE, JOANNE NAME NAME STREET ADDRESS 1255 PENNSYLVANIA AVE. #211 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL CITY-ST-ZIP TITLE ☐ Delete TITLE Addition BARTON, BRIAN BARTON, BRIAN NAME. NAME 1255 PENNSYLVANIA AVE. #105 MIAMI BEACH, FL 33139 STREET ADDRESS 1255 PENNSYLVANIA AVENUE #105 STREET ADDRESS CITY-ST-ZIP MIAMI BCH, FL 33139 CITY-SI-7IP TITLE ☐ Delete TITLE ☐ Change ★ Addition NAME NAME DREYER, MARTHA STREET ADDRESS STREET ADDRESS 1255 PENNSYLVANIA AVE. #106 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH, FL 33139 TITLE ☐ Delete TITLE ☐ Change Addition GIORGI, SIMONA NAME NAME 1255 PENNSYLVANIA AVE. #109 STREET ADDRESS STREET ADDRESS MIAMI BEACH, FL 33139 CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachagent with an address, with all other like empowered.

Joanne Rose/Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED** 

4/14/08

Date

(305) 279-1166

Daytime Phone #