## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003581

FILED Jan 25, 2008 Secretary of State

Entity Nai	HE. DAT DRIV	'E CONDOMINIUM ASSOCIA'	HON, INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
6881 BAY I MIAMI BEA	ORIVE ACH, FL 33141					
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 40 MIAMI, FL						
FEI Number:	65-0686198	FEI Number Applied For()	FEI Number Not Appl	licable ( ) Certificate of Status Desired (	)	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
KNAPP, PHILIP D 6881 BAY DRIVE #15 MIAMI BEACH, FL 33141 US			763 41ST 8 SUITE C	BENNETT, JOAN 763 41ST STREET SUITE C MIAMI BEACH, FL 33140 US		
The above in the State	named entity s of Florida.	ubmits this statement for the p	ourpose of changing i	its registered office or registered agent, or	both,	
SIGNATURE: JOAN BENNETT				01/25/2008		
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS	AND DIRECT	rors:	ADDITION	NS/CHANGES TO OFFICERS AND DIRE	CTORS	
Title: Name: Address: City-St-Zip:	P/D () KNAPP, PHILIP 6881 BAY DRIV MIAMI BEACH, I		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V/D () ARNOLD, DAVII 2495 TRAPP AV MIAMI BEACH, I	'ENUE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	ST/D () CARTER, DONN 6881 BAY DRIV MIAMI BEACH, I	E #1	Title: Name: Address: City-St-Zip:	T/D (X) Change ( ) Addition CARTER, DONNA 6881 BAY DRIVE #1 MIAMI BEACH, FL 33141		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	S/D ( ) Change (X) Addition MORRIS, RUTH 6881 BAY DRIVE #7 MIAMI BEACH, FL 33141		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition POWELL, STEPHEN 6881 BAY DRIVE #12 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: PHIL KNAPP Ρ 01/25/2008