2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002097

Feb 13, 2009 Secretary of State

Entity Name: EUCLID MANOR CONDOMINIUM ASSOCIATION, INC.

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

1540 EUCLID AVE. MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS PO BOX 191042 MIAMI BEACH, FL 33119

FEI Number: 65-0494721 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:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS 1370 WASHINGTON AVE. SUITE 312 MIAMI BEACH, FL 33139 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:

OFFICERS AND DIRECTORS:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RISSIOTIS, JULIE RISSIOTIS, JULIE Name: Name:

1540 EUCLID AVE # 201 Address: 1540 EUCLID AVE. # 201 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete Title: (X) Change () Addition WEERSINOR, CARL Name: WEERSING, CARL Name: Address: 1540 EUCLID AVE., 205 Address: 4130 NE 20TH AVE.

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: OAKLAND PARK, FL 33308

Title: () Delete Title: () Change () Addition

SEGAL, TEDDI Name: Name: 1220 EUCLID AVE #5 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

() Delete (X) Change () Addition Title: Title: DV

RODRIGUEZ, ÁL Name: Name: RODRIGUEZ, AL 1540 EUCLID AVE., 103 Address: Address: 1540 EUCLID AVE., #103 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete Title: (X) Change () Addition

GRANT, RICK Name: Name: GRANT, RICK

141 A WASHINGTON AVE. 141 A WASHINGTON AVE. Address: Address: City-St-Zip: BROOKLYN, NY 11205 City-St-Zip: BROOKLYN, NY 11205

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: TEDDI SEGAL D 02/13/2009