

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002768

FILED
Feb 25, 2004
Secretary of State**Entity Name:** THE ANTON CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1022 EUCLID AVE., #15
MIAMI BEACH, FL 33139 US**New Principal Place of Business:****Current Mailing Address:**1022 EUCLID AVE., #15
MIAMI BEACH, FL 33139 US**New Mailing Address:****FEI Number:** 65-0520690**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**YONAN, JAMES B
1022 EUCLID AVE., #15
MIAMI BEACH, FL 331394957 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: YONAN, JAMES
Address: 1022 EUCLID AVE 15
City-St-Zip: MIAMI BEACH, FL 33139**Title:** TD () Delete
Name: WATTERSON, MARK
Address: 1040 1ST AVE
City-St-Zip: NEW YORK, NY 10022**Title:** SD () Delete
Name: RUIZ, JOE
Address: 3957 SVE 156TH CT
City-St-Zip: MIAMI, FL 33185**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: YONAN, JAMES B
Address: 1022 EUCLID AVE. # 15
City-St-Zip: MIAMI BEACH, FL 331394957**Title:** VD (X) Change () Addition
Name: GOLDFUSS, JOHN
Address: 50 NW 204TH STREET, # 8
City-St-Zip: MIAMI, FL 33169**Title:** SD (X) Change () Addition
Name: WATTERSON, MARK
Address: 1040 1ST AVE., # 150
City-St-Zip: NEW YORK, NY 10022

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES B. YONAN

PD

02/25/2004

Electronic Signature of Signing Officer or Director

Date