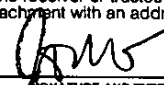


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 8:00 am
Secretary of State

03-20-2006 90013 020 ****61.25

DOCUMENT # N94000004732 1. Entity Name CHAMPLAIN TOWERS EAST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 8855 COLLINS AVENUE SURFSIDE, FL 33154 US			Mailing Address 8855 COLLINS AVENUE SURFSIDE, FL 33154 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02022006 Chg-NP CR2E037 (11/05)	
Zip		Country		4. FEI Number 65-0522606	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROGEL, DAVID H ESQ. C/O BECKER & POLIAKOFF, P.A. 5201 BLUE LAGOON DR., #100 MIAMI, FL 33126			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MUNDER, ARTURO 8855 COLLINS AVE. SURFSIDE, FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President O'Higgins Michael 8855 Collins Ave Surfside, FL 33154	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP O'HIGGINS, MICHAEL 8855 COLLINS AVE. SURFSIDE, FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Castano Jose 8855 Collins Ave Surfside, FL 33154	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CASTANO, JOSE 8855 COLLINS AVE. SURFSIDE, FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Opent, Sherron 8855 Collins Ave Surfside, FL 33154	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WATSON, RANDY 8855 COLLINS AVE. SURFSIDE, FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasure Santos, Frank 8855 Collins Ave Surfside, FL 33154	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PINEIRO, CARLOS 8855 COLLINS AVE SURFSIDE, FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Monkagudo, Eduardo 8855 Collins Ave Surfside, FL 33154	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 			3/14/06 305-866-1210		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		