2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N95000001284

Entity Name: LA TOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4201 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4201 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0593234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GANGUZZA, JOSEPH ESQ
SUNTRUST INTERNATIONAL CENTER 1 SE 3RD AVE
2150
MIAMI, FL 33131 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: VS ( ) Delete
Name: RISHE, NAPHTALI DR
Address: 4201 COLLINS AVE # 2603
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: KATZEN, JUDITH MRS.
Address: 4201 COLLINS AVE # 604
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: RODRIGUEZ, JOSE MR.
Address: 4201 COLLINS AVE #1502
City-St-Zip: MIAMI BEACH, FL 33140

Title: P ( ) Delete
Name: PRESTON, CANDYCE MRS.
Address: 4201 COLLINS AVE. #2202
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete
Name: PEREZ, JORGE DR
Address: 4201 COLLINS AVE #1203
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: RISHE, NAPHTALI DR
Address: 4201 COLLINS AVE # 2603
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: RODRIGUEZ, JOSE MR.
Address: 4201 COLLINS AVE #1502
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: PEREZ, JORGE DR
Address: 4201 COLLINS AVE #1203
City-St-Zip: MIAMI BEACH, FL 33140

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: CHRISTINA STEINMAN M 01/16/2009
Electronic Signature of Signing Officer or Director — Date