## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N96000000667

TI FILED
Sep 21, 2007
Secretary of State

Entity Name: SEA AIR TOWERS CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 3725 SOUTH OCEAN DRIVE HOLLYWOOD, FL 33019 **Current Mailing Address: New Mailing Address:** 3725 SOUTH OCEAN DRIVE HOLLYWOOD, FL 33019 FEI Number: 65-0643211 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: GLAZER AND ASSOCIATES, P.A. HYMAN SPECTOR & MARS, LLP 150 WEST FLAGER 1920 EAST HALLANDALE BEACH BLVD SUITE 27TH FLOOR SUITE 806 HALLANDALE, FL 33009 US MIAMI, FL 33130 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: GARY MARS 09/21/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PRESTAMO, CATALINA Name: Name: 3725 SOUTH OCEAN DRIVE APT 314 Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: Title: ( ) Delete () Change () Addition SILVEIRA, SILVIO Name: Name: Address: 1201 S OCEAN DT APT 2406 Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: VPD () Delete Title: () Change () Addition AMEIJEIRAS, LUIS Name: Name: 3725 S OCEAN DR APT 1615 Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: TD Title: () Change () Addition ( ) Delete Name: LAUDATO, GERALD Name: 3725 SOUTH OCEAN DR. APT PH-05 Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: Title: SD () Delete () Change () Addition BOLET, BEN Name: Name: 3725 SOUTH OCEAN DR. APT 611 Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip:

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: CATALINA PRESTAMO PD 09/21/2007