## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT** -- Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # N97000004923 1. Entity Name 2600 ISLAND BOULEVARD CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 2600 ISLAND BOULEVARD 2600 ISLAND BOULEVARD **BLDG ADM OFFICE BLDG ADM OFFICE** AVENTURA, FL 33160 AVENTURA, FL 33160 03302005 No Cha-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0780785 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SKRLD, INC. DO NOT WRITE 201 ALHAMBRA CIRCLE **SUITE 1102** IN THIS SPACE CORAL GABLES, FL 33134 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 critical hame of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. ΡŊ TITLE NAME WHITE, ROD STREET ADDRESS 2600 ISLAND BLVD #2802 CITY-ST-ZIP AVENTURA, FL 33160 04/14/05-80059-001 61.25 TITLE NAME WILLIAM, JOEL STREET ADDRESS 2600 ISLAND BOULEVARD #704 CITY-ST-ZIP AVENTURA, FL 33160 TITLE NAME LIPTON, GEORGE STREET ADDRESS 2600 ISLAND BLVD #1805 DO NOT WRITE CITY - ST - ZIP AVENTURA, FL 33160 TITLE IN THIS SPACE NAME RICE, LAWRENCE STREET ADDRESS 2600 ISLAND BLVD #1802 CITY-ST-ZIP AVENTURA, FL 33160 TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 115.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the fedaver 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 that have address, with all other like empowered.

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GOLDSTEIN, LINDA

2600 ISLAND BLVD #1903

AVENTURA, FL 33160

NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-30-*05* 

301.937-200

Daytime Phone #

FILED