2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000007166

FILED Aug 21, 2009 Secretary of State

Entity Name: CAPTIVA CONDOMINIUM B ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O MIAMI MANAGEMENT 14275 SW 142 AVENUE MIAMI, FL 33178

EXCELLENT PROPERTY MANAGEMENT 6955 NW 77TH AVE. STE. 401

MIAMI, FL 33166 New Mailing Address:

Current Mailing Address:

14275 SW 142 AVENUE MIAMI, FL 33178

EXCELLENT PROPERTY MANAGEMENT 6955 NW 77TH AVE. STE. 401

MIAMI, FL 33166

HALBERG, MICHAEL ESQ.

FEI Number: 65-0804436

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:

TRIAY, CARLOS ESQ 2301 NW 87TH AVENUE SUITE 501 DORAL, FL 33172 US

10800 BISĆAYNE BLVD. SUITE 988

MIAMI, FL 33161 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: MICHAEL HALBERG ESQ

08/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete MENCHELLI, CARLOS Name: 10750 NW 66TH ST # 514 Address: City-St-Zip: DORAL, FL 33178

(X) Change () Addition ALEMAN, ENRIQUE Name: Address: 10750 NW 66TH ST

City-St-Zip:

Title: () Delete CIFUENTES, ANA Name: Address:

DORAL, FL 33178 Title: (X) Change () Addition

10750 NW 66TH ST #304 City-St-Zip: DORAL, FL 33178

Name: CIFUENTES, ANA Address: 10750 NW 66TH ST City-St-Zip: DORAL, FL 33178

Title: STD () Delete DOPICO, NELSON Name: 10750 NW 66 CT #109 Address: City-St-Zip: MIAMI, FL 33178

Title: STD (X) Change () Addition

Name: DOPICO, NELSON 10750 NW 66 CT Address: City-St-Zip: MIAMI, FL 33178

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: ANA CIFUENTES **VPD** 08/21/2009