
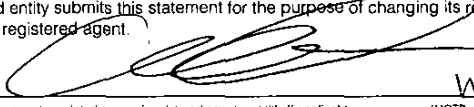
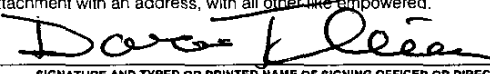


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 04, 2008 8:00 am**  
**Secretary of State**

08-04-2008 90033 016 \*\*\*\*61.25

<b>DOCUMENT # N99000000977</b> 1. Entity Name <b>MIZNER GRAND CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>500 SE 5TH AVENUE BOCA RATON, FL 33432</b>			Mailing Address <b>500 SE 5TH AVENUE BOCA RATON, FL 33432</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0938113</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>SACHS SAX KLEIN 301 YAMATO RD STE 4150 BOCA RATON, FL 33431</b>			7. Name and Address of New Registered Agent Name <b>William H. Isaacson</b> Street Address (P.O. Box Number is Not Acceptable) <b>40 Lang Management Company 21045 Commercial Trail Boca Raton, FL FL Zip Code 33486-1006</b>		
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  <small>Signature, typed or printed name of registered agent and title if applicable.</small>			<b>William H. Isaacson</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>Filing Fee is \$61.25 Due by September 12, 2008</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		
<b>\$5.00 May Be Added to Fees</b>			<b>Make check payable to Florida Department of State</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOMMER, RICK 400 SE 5TH AVE. BOCA RATON, FL 33432	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOCHHAUSCR, PAUL 400 SE 54TH AVE 804 N BOCA RATON, FL 33432	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP YULES, RICHARD 550 SE 5TH AVE. BOCA RATON, FL 33432	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, DAN 550 SE 5TH AVE. BOCA RATON, FL 33432	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALLMAN, CUBA 400 SE 5TH AVE. BOCA RATON, FL 33432	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KLEIN, ROBERT 500 SE 5TH AVE, 901 S BOCA RATON, FL 33432	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Sommer, Rick 400 S.E. 5th Ave Boca Raton, FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Yules, Richard 550 SE 5th Ave. Boca Raton, FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Thalheim, David 500 S.E. 5th Ave. Boca Raton, FL 33432	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Kaufman, Myron 450 S.E. 5th Ave. Boca Raton, FL 33432	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Elrad, Martin 550 S.E. 5th Ave Boca Raton, FL 33432	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:  <b>Treasurer 2/1/08</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					

60046235



07072008 Chg-NP CR2E037 (12/06)