2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 14, 2008 8:00 am Secretary of State

DOCUMENT # N99000001288 1. Entity Name ARCADIA HOUSE CONDOMINIUM PROPERTY OWNERS CONDOMINIUM ASSOCIATION, INC.						(05-14-	-2008 90	0009 02:	5 ****61.2	5
650 PENNSYLVANIA AVENUE 650			Mailing Address 650 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139			1 (18)((18) 18)	LEPTE CEIFE		lik Gard Falet	11818 11 3 81 (818) 1	inter on took
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	4153	42	_						
Suite, Apt. #, etc.		 	Suite, Apt. #, etc.			04102008	Chg-	NP	CR2E	037 (12/06)	
City & State		MIAMI BEACH, FL			7	65-067	4266				oplied For ot Applicable
Zip	Country	33141-93	42 Cour	<u>"US</u>		5. Certificate	of Statu	s Desired		\$8.75 Add Fee Require	
	6. Name and Address of Current F	Registered Agent		N1		. Name and					
GLAZER & ASSOCIATES, P.A.				Name THE WALL MANAGEMENT CORP Street Address (P.O. Box Number is Not Acceptable) 1440 JEKENNEDY CAUSEWAY # 429C							
1920 E. HALLNDALE BEACH BLVD. HALLANDALE BEACH, FL 33009				144	10	FEKE	UNE	BY CA	WSEW.	4y 7 4	<u> 290</u>
			-	CityNo	RTH S	BAY VI	LLA	(4F.	F	Zip Coo	e 4 7
	named entity submits this statement for ions of registered agent.	the purpose of chang	ing its registere	ed office or	registered				lorida. I ar	n familiar with	and accept
SIGNATURE	Malet	7	P.A.	•				· · · · · · · · · · · · · · · · · · ·	4/	26/08	P
A State of the	Signature, typed or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	Agent signatur	re required wh	en reinstating)			UATE		
Hill I	Filing Fee is \$61.25 Due by May 1, 2008	9. Election	(NOTE: Registered on Campaign Fil fund Contribution	nancing		5.00 May B	e i			ck payable (artment of S	
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12. Treically detuny that the information supplied with this filing does not quality 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 eath; 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:

BIGHATURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

4/126/08

Daytime Phone #