2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90341 040 ****61.25

DOCUMENT # N99000002576

1. Entity Name
ENCLAVE ON SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
349/359 MERIDIAN AVE MIAMI BEACH, FL 33139	C/O REGATTA REAL ESTATE 628 6TH STREET 2ND FLOOR MIAMI BEACH, FL 33139

2. Principal Place of Business	3. Mailing Address
349-359 Meridian Ave.	309- 23rd Street #3B
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Beach FL	City & State: Miami Beach FL
Zip: 33139 Country: U.S.A.	Zip: 33139 Country: U.S.A.

04212004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0920353 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VODA, TIM
C/O REGATTA REAL ESTATE
628 6TH STREET 2ND FLOOR
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent

Name: Regatta Real Estate Mgmt. Inc.
Street Address (P.O. Box Number is Not Acceptable): 309- 23rd Street #3B
City: Miami Beach **FL** Zip code: 33139

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITFIELD, MARK 359 MERIDIAN AVE. MIAMI BEACH, FL 33139	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD James Grundy 349 MERIDIAN AVE Miami BEACH FL. 33139.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD GREENSPOON, GERALD 100 W CYPRESS CREEK RD # 700 FORT LAUDERDALE, FL 33309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RODOLFO COELHO 349 MERIDIAN AVE. Miami BEACH FL. 33139.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MULLEN, SHEILA 100 W. CYPRESS CREEK RD. FORT LAUDERDALE, FL 33317	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LUIS DUARTE 349 MERIDIAN AVE Miami BEACH FL. 33139	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 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: James Grundy 04/23/04 305 525-5268
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #