2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# N99000006589

Entity Name: PARADISE POINT MARINA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5830 PARADISE POINT DR
VILLAGE OF PALMETTO BAY, FL 33157

New Principal Place of Business:

Current Mailing Address:

9000 SW 152ND ST
#102
MIAMI, FL 33157

New Mailing Address:

FEI Number: 02-0562313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, JOSEPH
9000 SW 152ST #102
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DVT ( ) Delete
Name: KAMINSKY, RICHARD
Address: 5844 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: PD ( ) Delete
Name: SZARO, DON
Address: 5855 PARADISE POINT DR
City-St-Zip: MIAMI, FL 33157

Title: S ( ) Delete
Name: GONZALEZ, GLORIA
Address: 5852 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: D ( ) Delete
Name: BENJAMIN, DEVIN
Address: 5840 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KAMINSKY, RICHARD
Address: 5844 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: TD (X) Change ( ) Addition
Name: SZARO, DON
Address: 5855 PARADISE POINT DR
City-St-Zip: MIAMI, FL 33157

Title: SD (X) Change ( ) Addition
Name: GONZALEZ, GLORIA
Address: 5852 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: VPD (X) Change ( ) Addition
Name: BENJAMIN, DEVIN
Address: 5840 PARADISE POINT DR
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

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: RICHARD KAMINSKY PD 01/28/2009

Electronic Signature of Signing Officer or Director — Date