

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042675

Entity Name: VERONA BAY CORPORATION

FILED  
Feb 05, 2009  
Secretary of State

## Current Principal Place of Business:

150 WEST FLAGLER ST., STE. 2200  
MIAMI, FL 33130

## Current Mailing Address:

150 WEST FLAGLER ST., STE. 2200  
MIAMI, FL 33130

## New Principal Place of Business:

13627 DEERING BAY DRIVE  
1002  
CORAL GABLES, FL 33158

## New Mailing Address:

550 PUERTA AVENUE  
CORAL GABLES, FL 33143

FEI Number: 65-0922517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREED, OWEN S  
150 WEST FLAGLER ST., STE. 2200  
MIAMI, FL 33130 US

## Name and Address of New Registered Agent:

FREED, OWEN S  
550 PUERTA AVENUE  
CORAL GABLES, FL 33143 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: OWEN S. FREED

02/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FREED, OWEN S  
Address: 550 PUERTA AVE.  
City-St-Zip: CORAL GABLES, FL 33143

Title: S ( ) Delete  
Name: FREED, SHEILA R  
Address: 150 WEST FLAGLER ST., STE. 2200  
City-St-Zip: MIAMI, FL 33130

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: FREED, SHEILA R  
Address: 550 PUERTA AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OWEN S. FREED

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

Date