

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008875

FILED
Mar 13, 2009
Secretary of State

Entity Name: 55 MERRICK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

848 BRICKELL AVE SUITE 810
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

119815 SW 144 CT
SUITE 201
MIAMI, FL 33186

New Mailing Address:

FEI Number: 26-0881973 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LISS, RICHARD
848 BRICKELL AVE SUITE 810
MIAMI, FL 33131 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: DP () Delete
Name: HILL, RANDALL
Address: 848 BRICKELL AVE SUITE 810
City-St-Zip: MIAMI, FL 33131

Title: DVP () Delete
Name: D'AGOSTINO, FRANCO
Address: 848 BRICKELL AVE SUITE 810
City-St-Zip: MIAMI, FL 33131

Title: DST () Delete
Name: LAMAR, LUIS
Address: 848 BRICKELL AVE SUITE 810
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: ESTRELLA, DAVID
Address: 55 MERRICK WAY SUITE 210
City-St-Zip: CORAL GABLES, FL 33134

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: LUIS LAMAR

_____ Electronic Signature of Signing Officer or Director

DSR

03/13/2009

_____ Date