2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# 718113

Entity Name: GREEN HILLS PARK WEST NO. 5, INC.

Current Principal Place of Business:

PARK WEST MANAGEMENT #5
17070 S.W. 112 COURT
MIAMI, FL 331573905 US

New Principal Place of Business:

Current Mailing Address:

% MIAMI MANAGEMENT
14275 SW 142ND AVE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-1297258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOBRIN, DAVID A
8900 SW 107 AVE #206
MIAMI, FL 33176 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:	S	( ) Delete
Name:	HOLMES, MARGARET	
Address:	11262 SW 169 ST	
City-St-Zip:	MIAMI, FL 33157	
Title:	P	( ) Delete
Name:	BAZAN, SCHILLER	
Address:	11304 SW 169 STREET	
City-St-Zip:	MIAMI, FL 33157	
Title:	D	( ) Delete
Name:	JOSEPH, MARIE	
Address:	11223 SW 70 TERRACE	
City-St-Zip:	MIAMI, FL 33157	
Title:	TD	( ) Delete
Name:	HINDMARSH, VICKIE	
Address:	11324 SW 169 ST	
City-St-Zip:	MIAMI, FL 33157	
Title:	VP	( ) Delete
Name:	CAMPBELL, BEULAH	
Address:	16926 SW 112 CT	
City-St-Zip:	MIAMI, FL 33157	
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:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	JOGLAR, GLADYS	
Address:	11266 SW 169 STREET	
City-St-Zip:	MIAMI, FL 33157	
Title:	D	( ) Change (X) Addition
Name:	PINIO, SANTIAGO	
Address:	11297 SW 169 STREET	
City-St-Zip:	MIAMI, 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: JOSE CORBO MGR 03/27/2009

Electronic Signature of Signing Officer or Director — Date