

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 08, 2007**  
**Secretary of State**

DOCUMENT# 724166

**Entity Name:** AVILA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**17620 ATLANTIC BLVD.  
SUNNY ISLES BEACH, FL 33160**New Principal Place of Business:****Current Mailing Address:**17620 ATLANTIC BLVD.  
SUNNY ISLES BEACH, FL 33160**New Mailing Address:****FEI Number:****FEI Number Applied For ( )****FEI Number Not Applicable (X)****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**REYES, GEMMA  
17560 ATLANTIC BLVD  
APT 214  
SUNNY ISELSE BEACH, FL 33160 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: O ( ) Delete  
Name: ARCILA, WILLIAM H  
Address: 17620 ATLANTIC BLVD APT 109  
City-St-Zip: MIAMI BEACH, FL 33160Title: P ( ) Delete  
Name: FIGALLO, JUAN  
Address: 17560 ATLANTIC BLVD APT 218  
City-St-Zip: MIAMI BEACH, FL 33160Title: T ( ) Delete  
Name: REYES, GEMMA  
Address: 17560 ATLANTIC BLVD APT 214  
City-St-Zip: SUNNY ISLES, FL 33160Title: VP ( ) Delete  
Name: MARSHALL, PAUL  
Address: 200 177TH DRIVE #110  
City-St-Zip: MIAMI BEACH, FL 33160Title: O ( ) Delete  
Name: MCDERMOTT, GERTRUDE  
Address: 17560 ATLANTIC BLVD APT 115  
City-St-Zip: SUNNY ISLES BCH, FL 33160Title: SEC ( ) Delete  
Name: GARRETT, GERRALDINE  
Address: 17570 ATLANTIC BLVD # 503  
City-St-Zip: SUNNY ISLES BEACH, FL 33160**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: ARCILA, WILLIAM H  
Address: 17620 ATLANTIC BLVD APT 109  
City-St-Zip: MIAMI BEACH, FL 33160Title: O (X) Change ( ) Addition  
Name: FIGALLO, JUAN  
Address: 17560 ATLANTIC BLVD APT 218  
City-St-Zip: MIAMI BEACH, FL 33160Title: ( ) 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:

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: WILLIAM ARCILA

P

08/08/2007

Electronic Signature of Signing Officer or Director

Date