

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727315

FILED
Mar 03, 2009
Secretary of State

Entity Name: WESTLAND GARDENS EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1855 WEST 62ND STREET
APT. #328
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 126965
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 59-1610011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PASCUAL, MARIA DEL C
1855 W. 62 ST
APT #328
HIALEAH, FL 33012 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: D () Delete
Name: HERNANDEZ, SERGUEI
Address: 1855 WEST 62 ST #314
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: PASCUAL, MARIA DEL C
Address: 1855 W. 62 ST. APT #328
City-St-Zip: HIALEAH, FL 33012

Title: VP () Delete
Name: ARROYO, EFRAIN
Address: 1855 WEST 62 STREET #105
City-St-Zip: HIALEAH, FL 33012

Title: P () Delete
Name: SCALLY, MICHAEL
Address: 1855 W 62 ST., #320
City-St-Zip: MIAMI, FL 33018

Title: TD () Delete
Name: RENE, REGUERA
Address: 1855 W. 62 ST., #104
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: MONTIEL, OSVALDO
Address: 1855 W 62 ST., #308
City-St-Zip: HIALEAH, FL 33012

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
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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: MICHAEL SCALLY

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date