

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738325

FILED
Apr 08, 2009
Secretary of State

Entity Name: WEST LAKE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2510 NW 970 TH
SUITE 200
DORAL, FL 33172 US

New Principal Place of Business:

2510 NW 97 AVENUE
SUITE 200
DORAL, FL 33172 US

Current Mailing Address:

2510 NW 97 AVE
SUITE 200
DORAL, FL 33172

New Mailing Address:

FEI Number: 59-1782193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIQUE, SYLVIA
C/O EXCEL MANAGEMENT
2510 NW 97 AVE STE 200
MIAMI, FL 33172 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: SCTANCSIK, NIDIA
Address: 561 NW 107 AVE #205
City-St-Zip: MIAMI, FL 33172

Title: VD () Delete
Name: LAMOGLIA, ALBERTO
Address: 461 NW 107 AVE. #204
City-St-Zip: MIAMI, FL 33172

Title: TD () Delete
Name: PEREZ, MARIA C
Address: 401 NW 107 AVE #105
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: SIERRA, ANNA
Address: 441 NW 107 AVE #202
City-St-Zip: MIAMI, FL 33172

Title: DS () Delete
Name: ACOSTA, MARIA
Address: 12731 NW 11 ST.
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCTANCSIK, NIDIA
Address: 2510 NW 97 AVENUE, SUITE
City-St-Zip: DORAL, FL 33172

Title: VP (X) Change () Addition
Name: LAMOGLIA, ALBERTO
Address: 2510 NW 97 AVENUE, SUITE 200
City-St-Zip: DORAL, FL 33172

Title: TD (X) Change () Addition
Name: PEREZ, MARIA C
Address: 2510 NW 97 AVENUE, SUITE 200
City-St-Zip: DORAL, FL 33172

Title: D (X) Change () Addition
Name: SIERRA, ANA
Address: 2510 NW 97 AVENUE, SUITE 200
City-St-Zip: DORAL, FL 33172

Title: DS (X) Change () Addition
Name: ACOSTA, MARIA
Address: 2510 NW 97 AVENUE, SUITE 200
City-St-Zip: DORAL, FL 33172

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: SYLVIA PIQUE

Electronic Signature of Signing Officer or Director

MGR

04/08/2009

Date