

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738325

FILED  
Apr 12, 2011  
Secretary of State

**Entity Name:** WEST LAKE VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2510 NW 97 AVENUE  
SUITE 200  
DORAL, FL 33172 US

**New Principal Place of Business:**

**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  
Name: SZTANCSIK, NIDIA  
Address: 2510 NW 97 AVENUE, SUITE  
City-St-Zip: DORAL, FL 33172

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: SZTANCSIK, NYDIA

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04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date