

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746207

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: MANGO HILL CONDOMINIUM ASSOCIATION NO. 12, INC.

**Current Principal Place of Business:**

6801 NW 77 AVE  
#205  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 940218  
MIAMI, FL 33194 US

**New Mailing Address:**

FEI Number: 59-2169455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RENOVATIONS PROPERTY MANAGEMENT  
6801 NW 77 AVE, SUITE 205  
MIAMI, FL 33166 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: VP ( ) Delete  
Name: CHINEA, LUIS  
Address: 6801 NW 77 AVE #205  
City-St-Zip: MIAMI, FL 33166

Title: D ( ) Delete  
Name: ALVAREZ GUERRA, BARBARA  
Address: 6801 NW 77 AVE #205  
City-St-Zip: MIAMI, FL 33166 US

Title: P ( ) Delete  
Name: GOMEZ, VICTOR  
Address: 6801 NW 77 AVE #205  
City-St-Zip: MIAMI, FL 33166

Title: S ( ) Delete  
Name: SUAREZ, JAQUELINE  
Address: 6801 NW 77 AVE #205  
City-St-Zip: MIAMI, FL 33166

Title: T ( ) Delete  
Name: CUERRA, JUAN C  
Address: 6801 NW 77 AVE #205  
City-St-Zip: MIAMI, FL 33166

**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: ( ) 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: VICTOR GOMEZ

P

03/02/2009

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

\_\_\_\_\_  
Date