

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000002434 1. Entity Name VILLAGE DEL MAR CONDOMINIUM ASSOCIATION, INC.		 FILED 08 SEP 26 AM 9:37 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 1269 NE 105TH STREET MIAMI SHORES, FL 33138		Mailing Address 1269 NE 105TH STREET MIAMI SHORES, FL 33138	
2. Principal Place of Business - No P.O. Box # 1200 NW 105 ST Suite, Apt. #, etc.		3. Mailing Address 1430 NW 15 AVENUE Suite, Apt. #, etc.	
City & State MIAMI SHORES, FL Zip 33138 Country USA		City & State MIAMI, FL Zip 33125 Country USA	
4. FEI Number 11-3717545		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROTH, ADAM 1295 NE 105TH STREET MIAMI SHORES, FL 33138		7. Name and Address of New Registered Agent Name: Joseph H. Ganguzza & Associates P.A. Street Address (P.O. Box Number is Not Acceptable): One S.E. Third Avenue, #2150 City: MIAMI FL Zip Code: 33131	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		DATE: 9-23-08	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ROTH, ADAM 1295 NE 105 STREET MIAMI SHORES, FL 33138 ☐ Delete	TITLE	P Roth, Adam 1430 NW 15 AVENUE MIAMI, FL 33125 ☒ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	VP GEMINO, CHRIS 1200 NE 105TH ST MIAMI SHORES, FL 33138 ☐ Delete	TITLE	T Treasurer GEMINO, CHRIS 1430 NW 15 AVENUE MIAMI, FL 33125 ☒ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	SEC SUMMERS, TOM 1277 NE 105 STREET MIAMI SHORES, FL 33138 ☐ Delete	TITLE	SEC Summers, TOM 1430 NW 15 AVENUE MIAMI, FL 33125 ☒ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 9-23-08 Daytime Phone #	