

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 14, 2009
Secretary of State

DOCUMENT# N03000003005

Entity Name: VISIONS AT FOUNTAINBLEAU PARK II. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8401 AND 8425 NW 8TH ST
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

C/O COMM MGMT CONSULTAN GROUP
3399 N.W. 72 AVE # 215
MIAMI, FL 33122

New Mailing Address:

FEI Number: 54-2119381 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DUGGER, ROBERT A SR
3399 N.W. 72 AVE.
SUITE 215
MIAMI, FL 33122 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: PD () Delete
Name: SANTANA, ANA
Address: 7953 NW 53RD ST
City-St-Zip: MIAMI, FL 33166

Title: TD () Delete
Name: BAS, DIEGO
Address: 7953 NW 53RD ST
City-St-Zip: MIAMI, FL 33166

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANTANA, ANA
Address: 8401 NW 8 ST #207
City-St-Zip: MIAMI, FL 33126

Title: VPD (X) Change () Addition
Name: FERNANDEZ, JOSE R
Address: 8401 NW 8 ST #205
City-St-Zip: MIAMI, FL 33126

Title: TD () Change (X) Addition
Name: MOREJON, NORMAN
Address: 8401 NW 8 ST # 403
City-St-Zip: MIAMI,, FL 33126

Title: SD () Change (X) Addition
Name: CORTEZ, AMANDA
Address: 8401 NW 8 ST # 203
City-St-Zip: MIAMI, FL 33126

Title: D () Change (X) Addition
Name: BAS, DIEGO
Address: 8401 NW 8 ST #405
City-St-Zip: MIAMI, FL 33126

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: ANA SANTANA

PD

10/14/2009

Electronic Signature of Signing Officer or Director

_____ Date