

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15065

FILED
Mar 29, 2007
Secretary of State

Entity Name: CARMEL TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9415 SUNSET DR
SUITE 149
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9415 SUNSET DR
SUITE 149
MIAMI, FL 33173

New Mailing Address:

FEI Number: 59-2620154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDESMA, ZENAIDA
1323 WEST 51 PL
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

MELONI, EDOARDO
900 S.W. 40TH AVENUE
PLANTATION, FL 33317 US

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: EDOARDO MELONI

03/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEDESMA, ZENAIDA
Address: 1323 WEST 51 PL
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: ALVAREZ, OSVALDO
Address: 5088 WEST 12 LN
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: CAZADILLA, LUIS
Address: 1319 WEST 51 PL
City-St-Zip: HIALEAH, FL 33012

Title: VP (X) Delete
Name: RAMIREZ, ALEXIS
Address: 1350 WEST 51 PL
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Delete
Name: SANTOS, EDGAR
Address: 1259 WEST 51 PL
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARCIA, GLADYS
Address: 9415 SUNSET DRIVE SUITE 149
City-St-Zip: MIAMI, FL 33173

Title: VP (X) Change () Addition
Name: LOPEZ, ELSA X
Address: 9415 SUNSET DRIVE SUITE 149
City-St-Zip: MIAMI, FL 33173

Title: TD (X) Change () Addition
Name: GARCIA, JOSE E
Address: 9415 SUNSET DRIVE SUITE 149
City-St-Zip: MIAMI, FL 33173

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 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: GLADYS GARCIA

PD

03/29/2007

Electronic Signature of Signing Officer or Director

Date